Annual WUCA membership dues for Affiliate Contractor members are \$750/year and prorated for firms joining in midyear.

APPLICATION FOR AFFILIATE CONTRACTOR MEMBERSHIP

STREET ADDRESS: CITY:	FIRM NAME:		
TELEPHONE:	STREET ADDRESS:		
E-MAIL ADDRESS:	CITY:	STATE :	ZIP:
PRINCIPAL OFFICERS AND DIRECTORS: PRESIDENT: SECRETARY: VICE PRES DIRECTOR: TREASURER: OTHER: I/We the undersigned, do hereby apply for membership in WISCONSIN UNDERGROUND CONTRACTORS' ASSOCIATION and do hereby agree to comply fully with and be governed by the Articles of Organization and by the By-Laws now in force or which may hereafter become operative. SERVICES YOUR FIRM RENDERS: SIGNED BY: TITLE: Other Members of your Firm Authorized to Represent You:	TELEPHONE:	FAX:	
PRESIDENT: SECRETARY:	E-MAIL ADDRESS:	WEB SITE:	
PRESIDENT: SECRETARY:	PARTNERSHIP:	_INDIVIDUAL:	
VICE PRES DIRECTOR: TREASURER: OTHER: I/We the undersigned, do hereby apply for membership in WISCONSIN UNDERGROUND CONTRACTORS' ASSOCIATION and do hereby agree to comply fully with and be governed by the Articles of Organization and by the By-Laws now in force or which may hereafter become operative. SERVICES YOUR FIRM RENDERS: SIGNED BY: TITLE: Other Members of your Firm Authorized to Represent You: Name & Title	PRINCIPAL OFFICERS AND DIREC	CTORS:	
TREASURER:OTHER:	PRESIDENT:	SECRETARY:	
I/We the undersigned, do hereby apply for membership in WISCONSIN UNDERGROUND CONTRACTORS' ASSOCIATION and do hereby agree to comply fully with and be governed by the Articles of Organization and by the By-Laws now in force or which may hereafter become operative. SERVICES YOUR FIRM RENDERS: SIGNED BY: TITLE: Name & Title	VICE PRES	DIRECTOR:	
CONTRACTORS' ASSOCIATION and do hereby agree to comply fully with and be governed by the Articles of Organization and by the By-Laws now in force or which may hereafter become operative. SERVICES YOUR FIRM RENDERS: SIGNED BY: TITLE: Name & Title Name & Title	TREASURER:	OTHER:	
SIGNED BY: TITLE: Other Members of your Firm Authorized to Represent You: Name & Title Name & Title	CONTRACTORS' ASSOCIATION are the Articles of Organization and by the	nd do hereby agree to compl	y fully with and be governed by
Other Members of your Firm Authorized to Represent You: Name & Title Name & Title	SERVICES YOUR FIRM RENDERS:		
Other Members of your Firm Authorized to Represent You: Name & Title Name & Title	SIGNED BY:	TITLE	
Name & Title Name & Title			
	Other Members of your Firm Authoriz	ed to Represent You:	Name & Title
	DATED:		Name & Title

DUES MUST ACCOMPANY THIS APPLICATION