

**Annual WUCA membership dues for Associate Members are  
\$750/year and prorated for firms joining in midyear.**

**APPLICATION FOR ASSOCIATE MEMBERSHIP**

FIRM NAME: \_\_\_\_\_

STREET ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

TELEPHONE: \_\_\_\_\_ FAX: \_\_\_\_\_

E-MAIL ADDRESS: \_\_\_\_\_ WEB SITE: \_\_\_\_\_

PARTNERSHIP: \_\_\_\_\_ INDIVIDUAL: \_\_\_\_\_

**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: \_\_\_\_\_  
Name & Title

DATED: \_\_\_\_\_  
Name & Title

**DUES MUST ACCOMPANY  
THIS APPLICATION**