



Membership Application

Revised 5.2016



Thank you for your interest in the SCHBA. We are excited you have decided to join our organization. Your membership with us automatically generates membership in both National Association of Home Builders (NAHB) and the Wisconsin Builders Association (WBA)! Please complete ALL sections of application. Dues are renewable annually based on your application anniversary date.

COMPANY INFORMATION *Mandatory Information

_____ Year Business Began

Company Name: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____

E-mail: _____ Website: _____

PRIMARY CONTACT PERSON *

Name: _____ Position: _____

Mobile Phone: _____ E-mail: _____

MEMBERSHIP INFORMATION *

Classification of Membership: Builder * _____ Associate * _____ Affiliate * _____

Builder: 1. Must be actively building and/or remodeling and have been in the trade for at least two years immediately prior to the date of this application. 2. Have acted as general contractor for at least 5 new housing and/or commercial building units (list addresses below), or remodeling projects which must be from start to completion and include multiple trades, within the 5 years immediately prior to the date of this application. 3. Provide proof of current contractor certifications as required by the state of Wisconsin.

Project Reference Address: #1 _____, #2 _____

#3 _____ #4 _____ #5 _____

DCQ – Dwelling Contractor Qualifier # _____; DCQ Expiration Date: _____

DC – Dwelling Contractor Certification # _____; DC Expiration Date: _____

Associate: Engages in building related trade activities and/or services provided to those in the industry.

Affiliate: Available to additional company representatives of a company currently holding a full membership. Allows voting rights and separate directory listing.

_____ A current **COI (Certificate of Insurance)** showing proof of liability coverage with a minimum of \$500,000 and SCHBA as the Certificate Holder will be sent directly to the SCHBA by my insurance agent **as required for membership in all classifications.**

TRADE REFERENCES: (please list 3 with one being your financial institution)

Name _____

Company _____

Phone _____

Email _____

METHOD OF PAYMENT

Payment by: _____ Check _____ MasterCard _____ Visa _____ Am/Ex _____

Account #: _____ Expiration: _____/_____/_____

Name on Card: _____ 3 Digit Security: _____

Address the Card Statement is sent to if different from above: _____

MEMBERSHIP DUES – dues are nonrefundable: _____ \$520 per Builder _____ \$520 per Associate _____ \$200 Affiliate

TAX DEDUCTIBLE CONTRIBUTION INFORMATION

Dues payments may be deducted as an ordinary and necessary business expense, subject to exclusion for lobbying activity. Please note a portion of your dues is not deductible for income tax purposes as an estimated 8% is allocated for lobbying by NAHB and WBA. Please request a paid invoice receipt for specific amounts.




PLEASE INDICATE ACTIVITY \$VOLUME AND # OF EMPLOYEES


Units Annually: _____ # of Employees: _____ Annual \$ Volume: _____


One directory category listing is free with membership. \$20 per additional category annually includes online and printed copy.
Web link from our site to yours annual \$25; Enhanced Directory Listing with logo and random selection and BOLD, annual \$100


Builder Member Activity	Associate Member Activity- cont'd	Associate Member Activity- cont'd
Builder - Commercial	Energy consultants	Real Estate
Builder – Multifamily or Condo	Equip., Tools & Machinery	Restaurants & Recreation
Builder – Remodel/Residential	Excavation Contractor	Roofing, Siding or Gutter Contractors
Builder – Single Family Custom & Spec.	Financial Institution	Security / Safety Systems
Builder – General Contractor	Fireplaces, Woodstoves	Shower Doors
Land Development	Furniture	Signs
Associate Member Activity	Garages	Stone
Subcontractor/Specialty	Geothermal / Solar	Sunrooms
Accounting	Hardwood Flooring	Trailers & Repairs
Acoustical/Radiant Heat Floor	Home Design & Estimating	Utilities & Fuel
Appliance Retailer	Home Theater, Audio, Video, Structured Wiring	Water Treatment
Architects	HVAC Contractor	Well Systems & Drilling
Basement Waterproofing,	Insulation Contractor	Window Treatments
Bathtub Repair & Refinishing	Insurance	Windows, Doors / Glass Products & Service
Building Materials & Supplies	Investments	
Business Development Services / Consultant	Kitchen & Bath	Committees of Interest
Cabinets/ Countertops & Woodworking	Land Surveyors	<i>(select all that apply)</i>
Carpenters	Landscaping / Contractors / Design / Sales	Advertising / Public Relations
Carpet & Flooring	Lawn Maintenance / Snow Removal	Build a Better WI (PAC)
Ceramic Tile	Log Homes	Education
Concrete/Masonry Materials	Marketing, Advertising or Public Relations	Finance
Crane & Lift Services	Media / Newspaper / Radio	Government Affairs
Decks & Fences	Moving Companies – Residential / Business	Home Exo
Decorating/Interior Design	Overhead Doors	Membership/ Member Services
Drywall Contractor	Painting	Parade of Homes (Fall)
Duct Cleaning	Plastering	Special Events
Electrical Contractor	Plumbing Contractors	Tour of Homes (Spring)
Electronics	Printing	
Elevator Sales & Service	QuickBooks Consultant	

MEMBERSHIP AGREEMENT

 I/We certify that [1] the foregoing statements on the front of this document are correct; [2] I/we do not have any pending ethical violations or unsatisfied financial obligations to this or any other local, state or national associations and [3] Have not been involved in industry-related judgements, claims, settlements, or lawsuits involving this or any company with which I/We have ownership?
 o If Yes, please explain: _____

 I/We agree, if accepted for membership, to abide by the bylaws and Code of Ethics (and all amendments thereof), of the association, the National Association of Home Builders (NAHB), and the Wisconsin Builders Association (WBA).

 Has applicant, owner or major shareholder declared bankruptcy within the past seven years?

 By applying for SCHBA membership and signing this form, you agree to receive telephone calls, faxes, emails and mailings from all levels of the Association according to current FCC regulations. Although none of these will be solicitations, they may include notices of events and sponsorship opportunities for which payment would be required.

Authorized Signature of Applicant:

DATE: _____

Signature

SCHBA Member Sponsor: _____