



# INDUSTRY PARTNER APPLICATION

GENERAL CONTRACTORS ■ PUBLIC AGENCIES ■ PRIVATE OWNERS

COMPANY NAME \_\_\_\_\_

STREET ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_ ZIP \_\_\_\_\_

PHONE \_\_\_\_\_ FAX \_\_\_\_\_ WEBSITE \_\_\_\_\_

MEMBERSHIP CATEGORY  GENERAL CONTRACTOR  PUBLIC AGENCY  PRIVATE OWNER

TYPE OF CONTRACTOR, OWNER, OR AGENCY \_\_\_\_\_

## PEOPLE DESIGNATED TO ATTEND ASA FUNCTIONS

NAME \_\_\_\_\_ EMAIL \_\_\_\_\_

NAME \_\_\_\_\_ EMAIL \_\_\_\_\_

NAME \_\_\_\_\_ EMAIL \_\_\_\_\_

NAME \_\_\_\_\_ EMAIL \_\_\_\_\_

*Attach 2<sup>nd</sup> sheet if needed to add more names*

## COMPANY / AGENCY OFFICERS

NAME \_\_\_\_\_ TITLE \_\_\_\_\_

NAME \_\_\_\_\_ TITLE \_\_\_\_\_

FIRST LEARNED OF ASA FROM \_\_\_\_\_

- In applying for ASA membership in the Industry Partner category, I hereby acknowledge my understanding that Industry Partners are not eligible to vote in association matters, nor may their representatives hold a seat on the ASA Board of Directors.*
- I hereby request that ASA send communications advertising its products, goods, and services to my company via fax and/or email until such date that I or my company / agency notifies ASA otherwise.*
- ASA has my permission to publish photographs of company / agency representatives or officers on the association's website or in its newsletter.*

SIGNATURE OF APPLICANT \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

**ANNUAL CONTRIBUTION: \$1,500.00**

*[Not deductible as a charitable contribution, but may be deductible as an ordinary business expense.]*

*Send application with check payable to Associated Subcontractors Alliance to: P.O. Box 600723, San Diego, CA 92160*