



SPECIAL NEW MEMBER DISCOUNT!!



1 Membership from now until 6-30-2013

Special Membership Price for Your Company

Table with 3 columns: Membership Category, 12 month Annual Dues, 16 month Special Dues Offer. Rows include Contractor Headquarters Office (U.S., Canada & International), Supplier or Distributor Headquarters Office, Manufacturer Headquarters Office, and General Interest.

NOTE: For Additional Offices, the Parent or Headquarters must be an AWCI Member. An additional location is a separate office or wholly owned corporation with a separate mailing address to receive membership benefits and mailings.

If your company's headquarter office is located in one of the following areas and you are a union contractor, please contact Marie Batiste, Membership System Manager, at (703) 538-1602 for special membership application information:

- California, Detroit, Hawaii, Minnesota, New Jersey, New York City, Ontario (Canada), Oregon, Philadelphia, Rye, NY, St. Louis, Texas, Washington

If your company's headquarter office is located in Colorado or Florida call the person listed to inquire about additional chapter benefits and processing your membership application.

Table with 2 columns: State (Colorado, Florida) and Contact Information (Association name, Name, Phone).

2 Company Name (spell out) \_\_\_\_\_
Principal Contact Name \_\_\_\_\_ Title \_\_\_\_\_
Web-address \_\_\_\_\_ E-mail address \_\_\_\_\_
Mailing Address \_\_\_\_\_
City/State/Province \_\_\_\_\_ Country \_\_\_\_\_ Postal/ZIP Code \_\_\_\_\_
Phone \_\_\_\_\_ Fax \_\_\_\_\_

I understand that I am providing the fax number(s) above, on behalf of the company/organization specified above and that I am authorized to and hereby consent for my company/organization to receive faxes sent to me by the Association of the Wall and Ceiling Industry and the Foundation of the Wall and Ceiling Industry.

Signature \_\_\_\_\_ Payment Options: \_\_\_ Check (enclosed) (U.S. Funds Only)

3 -> Cardholder Signature \_\_\_\_\_ Date \_\_\_\_\_
Credit Card # \_\_\_\_\_ Expiration Date \_\_\_\_\_

Publication Benefit: o YES, start or continue my subscription to AWCI's Construction Dimensions.
o No, I do not want to start or continue my subscription to AWCI's Construction Dimensions.

Please be sure that at least one item in each of columns 1, 2 and 3 is checked

- 1. Your Business: Contractor, Manufacturer, Supplier/Distributor, Architect/Specifier, Engineer, Other
2. Type of Business: Ceilings/Acoustics, Drywall, EIFS, Fireproofing, Insulation, Lath/Metal Framing, Plaster, Spray Textures/Paint, Stucco, Other
3. Title/Function: Owner/Partner, President, Vice President, Supervisor, Project Manager, Estimator, Field Personnel, Other

4 -> Recipient Signature \_\_\_\_\_ Date \_\_\_\_\_

\$34 of your membership dues pays for a one-year subscription to AWCI's Construction Dimensions magazine.

Fax this form with your credit card information to (703) 538-1722, or mail this form with your payment to AWCI Membership Department 513 West Broad Street, Suite 210, Falls Church, VA 22046