

# NEW MEMBER APPLICATION

## CONTACT INFO *(please print)*

(Check one)  Male  Female Birth Year: \_\_\_\_\_  
USED FOR DEMOGRAPHIC PURPOSES ONLY

Name: \_\_\_\_\_ Title: \_\_\_\_\_  
LAST FIRST MI

Mailing Address: \_\_\_\_\_  
STREET SUITE/MAIL STOP CITY STATE ZIP + 4 REQUIRED

E-Mail: \_\_\_\_\_ Phone: ( ) \_\_\_\_\_ Fax: ( ) \_\_\_\_\_  
CIRCLE ONE: OFFICE PERSONAL

Company/Organization: \_\_\_\_\_ Chapter: \_\_\_\_\_  
PLEASE SELECT A CHAPTER NEAREST TO YOU FROM THE CHAPTER LIST ON REVERSE SIDE

Company Gross Revenue: \$ \_\_\_\_\_  
LAST FISCAL YEAR-USED FOR DEMOGRAPHIC PURPOSES ONLY

What are your expectations from your CFMA membership?  Education  Connecting with peers

Other expectations: \_\_\_\_\_

How did you hear about CFMA?  Direct Mail/E-mail  Building Profits  Education  Website  Chapter \_\_\_\_\_  
 Association \_\_\_\_\_  CFMA Member \_\_\_\_\_

## MEMBERS *(check one)*

### GENERAL MEMBERS

*(check one)*

- General Contractor
- Sub/Specialty Contractor  
(Please indicate primary specialty trade from the choices at right)
- Heavy/Highway Contractor
- Construction Management
- Suppliers-Material Contractor
- Real Estate Developer
- Architect/Engineer

SIC Code(s): \_\_\_\_\_

### Primary Specialty Trades

(Applies only to those general members who are sub/specialty contractors. Check one.)

- Electrical
- Mechanical
- Plumbing/HVAC
- Drywall
- Concrete
- Other \_\_\_\_\_

SIC Code(s): \_\_\_\_\_

### ASSOCIATE MEMBERS

*(check one)*

- Public Accounting
- Surety & Bonding
- Insurance Agency/Carrier
- Software/Hardware
- Banking & Finance
- Law Practice
- Other \_\_\_\_\_

SIC Code(s): \_\_\_\_\_

CFMA does not bill for initial dues. \$0 of dues are used for lobbying expenses.

National and Chapter dues are prorated if you join CFMA April 15 – September 15. More information on prorated dues can be found under the Membership tab on [www.cfma.org](http://www.cfma.org) or contact CFMA with any questions.

## JOIN CFMA

### 4 Easy Ways to Join:

**MAIL:** 100 Village Blvd., Suite 200, Princeton, NJ 08540-5783

**E-MAIL:** [membership@cfma.org](mailto:membership@cfma.org) **ONLINE:** [www.cfma.org](http://www.cfma.org)

**FAX:** 609-452-0474

Check enclosed payable to CFMA

AMEX  VISA  MASTERCARD  DISCOVER

ACCOUNT #: \_\_\_\_\_

Name on Card: \_\_\_\_\_

EXPIRATION DATE: \_\_\_\_ / \_\_\_\_ / \_\_\_\_  
MO YR

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Who pays membership dues:  Company  Self

*(General or Associate)* **CFMA National Member Dues: \$** \_\_\_\_\_

**+ Local Chapter Member Dues: \$** \_\_\_\_\_

**TOTAL: \$** \_\_\_\_\_

## CFMA CHAPTER LOCATIONS

### Chapter Locations and applicable chapter dues on reverse side.

By joining a local chapter, you can take full advantage of the many benefits offered by CFMA. It is important that you select a local chapter in your geographic area that would be most convenient for you to attend local meetings and events. If you do not wish to be associated with a chapter or there is not a chapter near you, please check the Non-Affiliated box.  Non-Affiliated

## QUESTIONS?

**Contact:** Mike Verbanic, Director, Member Experience at 609-945-2418 or [mverbanic@cfma.org](mailto:mverbanic@cfma.org)  
or Member Services at 609-452-8000/888-421-9996 or [membership@cfma.org](mailto:membership@cfma.org) • Fax: 609-452-0474

