



MEMBERSHIP APPLICATION

Date of Application: _____

CORPORATE INFORMATION

Company Name: _____
 Corporate Street Address: _____
 City, State, Zip: _____
 Corporate Phone Number: _____
 Fax Number: _____
 Website address: _____
 Business Structure: Individual Sole Proprietorship Partnership Corporation

Please give us a brief description and history of your business:

MAIN POINT OF CONTACT

Contact Name: _____
 Title: _____
 Office Phone Number: _____
 Mobile Phone Number: _____
 Mailing Address: _____
 City, State, Zip: _____
 Email Address: _____

TYPE OF MEMBERSHIP

PRODUCER MEMBERSHIP

Please indicate type of concrete products manufactured:

Counties that you service:

ASSOCIATE MEMBERSHIP

Please indicate type of products or services you provide:

BILLING CONTACT INFORMATION

Who should we (FICAP) contact regarding invoices and payments?

Contact Name: _____
 Phone Number: _____
 Mailing Address: _____
 City, State, Zip: _____
 Email Address: _____

What is your preference for how you receive invoices? Email Mail

I (we) hereby apply for membership in Florida Independent Concrete and Associated Products, Inc. (FICAP) based on the foregoing statements.

Completed applications will be considered by the Association at the next regular meeting. I (we) understand that acceptance of this application does not constitute membership until approved by a majority of the Board of Directors, in accordance with the bylaws. Applicants will be notified in writing upon approval of this application by the Board of Directors.

I (we) agree that if I (we) wish to withdraw our membership, I (we) will pay all dues and indebtedness due the Association and tender the resignation in writing to the Board of Directors. In the event of termination of my (our) membership, I (we) agree to immediately discontinue the use of the FICAP insignia or logo in any form.

I (we) understand and accept the above terms and conditions.

Applicant's Signature

Sponsor's Name (if any)

Payment Information

*Annual Dues for Producer or Associate Memberships are \$1500.
Please include your first year's membership dues with this application.*

\$ _____ Total fee(s) enclosed or to be charged to the credit card listed below.

Payment Type: Check Enclosed American Express Mastercard Visa

Credit Card Number: _____

Expiration Date: _____

Security Code: _____

Name as it appears on card: _____

Billing address and zip code: _____

Cardholder Signature: _____

Make checks payable to FICAP.

Please mail completed application to
FICAP, P.O. Box 953905, Lake Mary, Florida 32795-3905
or email to michele@ficap.org.

Be sure to include payment for first year's membership dues.
If you have any questions about this application or about FICAP,
please call 407-302-3316 or email michele@ficap.org.

ASSOCIATE MEMBERS: WEBSITE LISTING INFORMATION

Our Producer members feel strongly about doing business with fellow FICAP members and refer to the website as their resource for contact information. Please utilize this valuable tool by including your listing information below.

SAMPLE

Name: Mike Smith
Title (optional): Sales Rep
Region/Product (optional): Northeast Division
Phone Number: 407-555-1234
Email Address: mike.smith@samplecompany.com

Contact #1

Name: _____
Title (optional): _____
Region/Product (optional): _____
Phone Number: _____
Email Address: _____

Contact #2

Name: _____
Title (optional): _____
Region/Product (optional): _____
Phone Number: _____
Email Address: _____

Contact #3

Name: _____
Title (optional): _____
Region/Product (optional): _____
Phone Number: _____
Email Address: _____

Contact #4

Name: _____
Title (optional): _____
Region/Product (optional): _____
Phone Number: _____
Email Address: _____

Contact #5

Name: _____
Title (optional): _____
Region/Product (optional): _____
Phone Number: _____
Email Address: _____

WEBSITE CATEGORIES

Please Check All That Apply

- Admixtures/Chemicals
- Aggregates
- Aggregates, Lightweight
- Cement - Masonry Bulk & Bag
- Computerized Batching & Accounting Systems
- Concrete Coloring & Texturizing Systems
- Electrical Installation, Repairs, Plant Wiring
- Engineering - Specific to Concrete Plants
- Equipment Financing & Leasing
- Fiber Reinforcement
- Flyash
- Industrial Cleaners & Removers
- Insurance
- Legal and Law Consultation
- Material Handling, Plants and Plant Equipment
- Pavers & Walls
- Pre-Cast: Lintels, Sills, Bumpers
- Slag Cement - GGBFS
- Surveillance
- Transportation & Trucking
- Truck, Truck Mounted Mixers & Equipment
- Weighing
- Wholesale Construction Materials
- Other, please specify: _____