

**Associated Builders and Contractors, Inc. of Central Florida  
2012 ANNUAL MEMBERSHIP APPLICATION**

Company:		Date:	
Street:		Phone:	Fax:
City, State & Zip Code:		Web Address:	
Billing Address if different than mailing address:		City, State & Zip Code:	
Billing Contact:		Billing Phone:	Billing contact E-mail:
Number of Employees:	In Business Since _/ _/ _	Do you provide training for your employees?	Minority-owned business? Yes/no If applicable, please circle: MBE WBE DBE
What is your primary interest for joining? Please check all that apply. <input type="checkbox"/> Political Advocacy <input type="checkbox"/> Education and Safety <input type="checkbox"/> Networking and Business Development <input type="checkbox"/> Service to Industry <input type="checkbox"/> Other: _____		Is your company interested in participating in an ABC Discount Program? <input type="checkbox"/> YES <input type="checkbox"/> NO If yes, please indicate: <input type="checkbox"/> Cell Phone <input type="checkbox"/> Express Delivery <input type="checkbox"/> Vehicle Lease/Purchase <input type="checkbox"/> Office Supplies <input type="checkbox"/> Fuel Discount <input type="checkbox"/> Other: _____	
Your products and services:		CSI Codes:	
Who at your company is ABC's primary contact?		Title:	Email:
Authorizing signature		Title:	Contractor License Number (if applicable):

**Company Executives (required)**

Senior Company Official in Central Florida (Name):	Title:	Email:
Other Senior Company Official in Central Florida (Name):	Title:	Email:
Legislative Contact / Title		Email:
Business Development/Marketing Contact / Title		Email:
Training Contact / Title		Email:
Safety Contact / Title		Email:
Name of ABC member who encouraged you to join / Company Name:		

**NOTICE:** ABC membership dues include membership in the Central Florida Chapter, ABC of Florida and ABC National, unless the company is a member in another chapter. ABC general and subcontractor membership dues are based on sales volume from the previous fiscal year and are due in full upon joining. For members joining in February or later, a credit toward the following year's dues will be issued with the first membership renewal billing. ABC dues are not deductible as a charitable contribution for Federal income tax purposes, but may be partially deductible as a business expense. For each year of your membership, the company will receive a notice of the exact amount of your dues declared to be used for lobbying expenses on behalf of the membership which is not deductible.

VOLUME	CATEGORY	DUES	
<b>CONTRACTOR</b>			
Over \$50 million	12	<input type="checkbox"/>	\$5,924.00
\$20 to \$50 million	11	<input type="checkbox"/>	\$4,825.00
\$15 to \$20 million	10B	<input type="checkbox"/>	\$4,490.00
\$10 to \$15 million	10A	<input type="checkbox"/>	\$4,242.50
\$6 to \$10 million	9	<input type="checkbox"/>	\$3,605.00
\$3 to \$6 million	8	<input type="checkbox"/>	\$3,104.50
\$1 to \$3 million	7	<input type="checkbox"/>	\$2,417.50
\$500,000 to \$1 million	6	<input type="checkbox"/>	\$1,902.50
\$0 to \$500,000	4	<input type="checkbox"/>	\$1,320.00
<b>ARCHITECT</b>	3	<input type="checkbox"/>	\$500.00
<b>SUPPLIER</b>	2	<input type="checkbox"/>	\$1,395.00
<b>ASSOCIATE</b>	1	<input type="checkbox"/>	\$1,395.00



Representing Lake,  
Orange, Osceola,  
Seminole and Volusia  
Counties  
in Florida

**Contractor Member** - Active in the construction field: prime & subcontractors in all types of construction

**Supplier Member** - Supply materials to contractors, shops or jobsites, but provide no on-site labor

**Associate Member** - Provide services to the construction industry but no materials or labor (i.e. attorneys, insurance companies, engineers, etc.)

Optional Contribution: <input type="checkbox"/> \$50 PAC <input type="checkbox"/> \$100 Apprenticeship	Please total Dues + Contributions		
We accept MasterCard, Visa, American Express. Your card type: <input type="checkbox"/> VISA <input type="checkbox"/> MC <input type="checkbox"/> AMEX	3 or 4 Digit Code on front or back of card	Billing Address for Credit Card	Billing ZIP Code for Credit Card
Expiration Date:	Name on card:		



Please remit to:  
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Associated Builders and Contractors  
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Main: (407) 628-2070 Fax: (407) 629-0144  
Email: slewis@ABCcentralflorida.org  
Web: <http://www.abccentralflorida.com>

Please list a business associate you feel can benefit from Central Florida ABC membership: