

## APPLICATION FOR UMCA CONTRACTOR MEMBERSHIP

Company Name: \_\_\_\_\_

Sole Proprietorship

Partnership

Corporation

Street Address: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

Mailing Address: \_\_\_\_\_ FAX: (\_\_\_\_) \_\_\_\_\_

City/State or Province/Zip Code: \_\_\_\_\_ E-mail: \_\_\_\_\_

State or Province Contractor License No.: \_\_\_\_\_ Class of License: \_\_\_\_\_

Print Name and Title of Company Official(s):

1. \_\_\_\_\_ 2. \_\_\_\_\_

3. \_\_\_\_\_ 4. \_\_\_\_\_

The above named company hereby makes application for active membership in the Utah Mechanical Contractors Association. Through this application, the undersigned approves of all Bylaws and Articles of Incorporation of the Utah Mechanical Contractors Association.

The undersigned further approves the dues of the Utah Mechanical Contractors Association in the amount of three cents (.30¢) per field employee per hour worked. This approval shall be effective on the date of this application, and thereafter until the amount of said dues is modified in accordance with the Bylaws and Articles of Incorporation of the Utah Mechanical Contractors Association.

Signature of  
Company Official: \_\_\_\_\_ Date of Application: \_\_\_\_\_

For more information, please contact the UMCA office at (801) 364-7768.

*Application Received* \_\_\_\_\_

*For UMCA office use only:*

*Application Approved* \_\_\_\_\_