

BCWCA Membership Application Form

Company Name:			
Address:		City:	
Postal Code:		Telephone:	
Cell:		Email:	
Co. Representative:			

Industry Category: (Please tick one)

Contractor <input type="checkbox"/>	Manufacturer <input type="checkbox"/>	Dealer <input type="checkbox"/>	Labour <input type="checkbox"/>	Mfr. Rep <input type="checkbox"/>	Other <input type="checkbox"/>
Number of years in Business:					

Applicants require the recommendation of three (3), minimum of two (2) current BCWCA members in good standing (**can be a Contractor, Dealer or Manufacturer**):

1. I/WE, _____, HEREBY
(Print Company Name)

RECOMMEND _____ FOR BCWCA
(Print Applicant Name)

MEMBERSHIP.

Signature: _____

2. I/WE, _____, HEREBY RECOMMEND
(Print Company Name)

_____ FOR BCWCA MEMBERSHIP.
(Print Applicant Name)

Signature: _____



3. I/WE, _____, HEREBY RECOMMEND
(Print Company Name)
_____ FOR BCWCA MEMBERSHIP.
(Print Applicant Name)

Signature: _____

General Applications: PLEASE ALSO ATTACH the following: Three (3) industry references complete with name, address and telephone (not necessarily BCWCA members)

- Three (3) completed projects undertaken by your company, including date of completion, name and telephone of supplier/dealer of those projects.

Contractor Applications: Provide the following:

- Three (3) completed projects undertaken by your company, including date of completion, name, and telephone of supplier / dealer of those projects.
- Three (3) supplier credit references complete with name, address, and contact telephone numbers. References to include at least 2 dealers.
- Company must have a minimum of 2 years of operation in the wall and ceiling business.
- Applicants agree to allow the Association to contact WorkSafeBC, WCB of Alberta, or OHSA to verify the applicant is "Registered" in good standing "as a Contractor".

Membership dues are as per the attached *Membership Fee Structure*. Please make cheque payable to the BCWCA upon receipt of invoice or pay online here:

Upon acceptance, the undersigned promises to abide by the Constitution, Bylaws and Code of Ethics of the Association and pledges support of the Association for the general good and welfare of the building industry and members in general. The undersigned also agrees to use and display any Association logo or emblem only so long as they remain an Association member in good standing. I hereby consent to any of the above listed references being contacted.

I have read the terms of membership as per the BCWCA Code of Ethics

Signature: _____ Date: _____

Please return the completed application to the BCWCA Head office at:

- BC Wall & Ceiling Association #112, 18663 52nd Ave, Surrey, BC, V3S 8E5
- admin@bcwca.org