



Date \_\_\_\_\_

## APPLICATION FOR ACTIVE MEMBERSHIP

*The undersigned hereby makes application for Active Membership in the Contractors Association of Eastern Pennsylvania.*

*Upon admission to membership, the undersigned agrees to be bound by the By-Laws of the Association, the Dues and Assessments Structure, and such other rules and regulations as may be adopted.*

*The undersigned hereby appoints the Labor Committee of the Association as its exclusive bargaining agent to negotiate collective bargaining agreements, in accordance with Article VIII of the By-Laws.*

COMPANY \_\_\_\_\_

ADDRESS \_\_\_\_\_  
\_\_\_\_\_

TELEPHONE \_\_\_\_\_ FAX \_\_\_\_\_

EMAIL \_\_\_\_\_

WEBSITE \_\_\_\_\_

NAME, TITLE AND ADDRESS OF PERSON TO WHOM COMMUNICATIONS SHOULD BE SENT:

\_\_\_\_\_  
\_\_\_\_\_

TYPE OF FIRM (CORPORATION, PARTNERSHIP OR INDIVIDUAL):

\_\_\_\_\_

NAME OF OFFICERS, PARTNERS OR OWNER \_\_\_\_\_  
\_\_\_\_\_

TYPE OF WORK PERFORMED: HEAVY \_\_\_\_\_ HIGHWAY \_\_\_\_\_ UTILITIES \_\_\_\_\_

DO YOU ENGAGE IN GENERAL CONTRACTING EXCLUSIVELY? YES \_\_\_\_\_ NO \_\_\_\_\_

IF "NO", WHAT OTHER LINES DO YOU FOLLOW? \_\_\_\_\_  
\_\_\_\_\_

RECOMMENDED BY \_\_\_\_\_

COMPANY & AUTHORIZED SIGNATURE \_\_\_\_\_

BOARD APPROVAL \_\_\_\_\_ RATIFIED / ADMITTED \_\_\_\_\_

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CAEP Active Membership (Base) Fee: \$1,000.00

APC Affiliate Membership Fee: \$445.00

Please remit membership application and payment to:

CAEP ♦ 1500 Walnut Street ♦ Suite 1105 ♦ Philadelphia, PA 19102 ♦ Fax: (215) 546-2259

▪ Check Enclosed for \$ \_\_\_\_\_

▪ Credit Card Payment Amount to be Charged \$ \_\_\_\_\_

VISA

MASTERCARD

AMERICAN EXPRESS

Credit Card No. \_\_\_\_\_ Exp. Date \_\_\_\_\_

Billing Address \_\_\_\_\_

Cardholder's Name \_\_\_\_\_

Cardholder's Signature \_\_\_\_\_