## ASSOCIATED GENERAL CONTRACTORS OF GEORGIA, INC.

1940 The Exchange; Suite 100 ♦ Atlanta, GA 30339-2002 678.298.4100 ♦ f: 678.298.4101 ♦ 800.203.4629 ♦ www.agcga.org



## SERVICE PROVIDER MEMBERSHIP APPLICATION

Company

Company					
Primary Contact	Title ted as the primary contact in our online member directory. It's preferable for this person to be a company executive.				
	City				
Street Address (if different)					
Website					
Phone	If in Georgia, please provide cou	nty			
Owners/Partners/Officers (The order provide be					
Name	Title	Email			
Name					
Name					
Name	Title_	Email			
Year Company was Established					
<ul> <li>522110 Bank Facility</li> <li>541110 Attorney</li> <li>541211 Certified Public Accountants</li> <li>541690 Cost Analysis (Estimating) Consultant</li> <li>594204 Education Materials (Retail Bookstores)</li> <li>628205 Financial Planning</li> </ul>	☐ 641112 Insurance ☐ 731199 Marketing Design ☐ 731302 Promotional Products ☐ 733617 Reprographic Services ☐ 737101 Computer Services	□ 874208 Safety Consult □ 874264 Scheduling Co □ Other Code  Description	nsultants		
It's important to regularly update your com visitors seeking to do business with membe					
Profile Administrator	Title				
Email	Direct Phone				
Number of company employees  The company named on the first line of this form of Georgia, Inc. The primary person named above membership application covers Supplier Member	n hereby makes application for Supplier Mem e is personally familiar with the applying cor	mpany and its work. It is acknowle	edged this		
primary contact certifies the foregoing statemen AGC of America and the Bylaws and Dues Struct  Signature of Primary Contact	- · · · · · · · · · · · · · · · · · · ·		ylaws of the		

## **ANNUAL DUES INVESTMENT**

Service Provider Membership ......\$1,548

Your company's full payment or your commitment for 12 auto-draft monthly payments (see next page) is due with the submission of this application. Your company's second year dues are pro-rated from the first anniversary date to December 31 of that year. Your third and subsequent year's dues are billed in full and are payable by January 31 that year or by monthly auto-draft. Dues payments and other fees are deductible as ordinary and necessary business expenses under IRS Code Section 162. Dues, excluding monies paid to AGC Georgia Foundation, Inc., are not deductible as charitable contributions. An amount equal to 10% of dues is allocable to Lobby Activities conducted by AGC Georgia on behalf of its members. Members are not allowed a deduction for Federal Income Tax purposes for this portion of their dues. Please see Payment Information on next page for more information about dues and PAC contributions.

## **ADDITIONAL RESOURCES & PROMOTIONAL OPPORTUNITIES**

- ▶ By joining AGC Georgia, www.agcga.org, your firm automatically becomes a member of AGC of America, www.agc.org, the parent organization of 89 AGC chapters. All chapters are independently operated.
- If your firm has **additional offices**, please provide contact information. This information is used to communicate AGC Georgia news and is also the contact included in your firm's online member listing. Use separate page, if necessary.

(1) Additional location name	<u> </u>	Contact				
Title	Email		Phone			
Mailing Address		City	State	Zip		
(2) Additional location name	e	Contact				
Title	Email		Phone			
Mailing Address		City	State	Zip		
The Forum, provide their participation in the events	weekly e-newsletter, <i>The Forum</i> . To ha information below. All employees can s. All will be associated with primary b separate page, if necessary.	learn from the newslet	ter and help coording	nate your firm's		
Name	Title		_ Email			
Name	Title		_ Email			
Name	Title		_ Email			
Optional - must be paid in	full at time of submission ogo displayed on our online member; I will email a high resolution color log	orofile. I've included an		this listing with m		
☐ Accept our tax-deduc	ctible corporate donation to AGC Geo	orgia Foundation, Inc. i	n the amount of \$			
Payment Options  Pay in full with Check (Payable to AGC Georgia)  OR Pay 12 equal AUTO-DRAFT monthly payment First payment processed upon application's approx		ents via credit card				
	Total commitment \$	including optio	nal opportunities, if a	applicable		
Credit Card Payment: 🔲 V	ISA 🔲 MC 🔲 AMEX 🔲 D	iscover				
Card #	Name on CC		Expiration			
in AGC Georgia prior to you the above credit card being	equal credit card auto-draft paymer ur anniversary date, by way of declin g charged \$258, two months dues pa nature below affirms consent to the	ing credit card charg ayment. This is a one-	es or any other met	thod, you agree t		

Regardless of payment method, use the SUBMIT button, fax to 678.298.4109 or scan/email to harper@agcga.org. Paying by check - mail check and completed application to Machell Harper, AGC Georgia, 1940 The Exchange; Suite 100, Atlanta, GA 30339. For questions about the application, please contact Machell, Senior Director, Member Services, at 678.298.4108 or harper@agcga.org.

Submit