



MEMBER APPLICATION - ASSOCIATE

We hereby apply for membership in the
American Subcontractors Association of Wisconsin
and agree to abide by its bylaws.

Company Name: _____

Street Address: _____

P.O. Box: _____ **City, State and ZIP Code:** _____

Phone: _____ **Fax:** _____

E-mail Address: _____ **Web site:** _____

Principal Business: _____
(e.g., accounting, attorney, banking, insurance, etc.)

Other Business: _____

(Optional): Sales Volume: _____ Number of Employees: _____

The following person will represent us in the association:

Name _____ **Title** _____

Our alternate representative(s) will be:

Name _____ **Title** _____

Name _____ **Title** _____

By (signature): _____ **Date** _____

Sponsored by: _____

Chapter/National Dues
\$775.00*

Payable To
ASA of Wisconsin
660 East Mason Street
Milwaukee, WI 53202-3877
(414) 227-1230

* Dues effective July 1, 2010. Dues are pro-rated from the date of membership. ASA national dues of \$400.00 are included in your membership. ASA national dues include a \$55 subscription to *Contractor's Compass*, ASA's quarterly educational journal. Dues payments are not deductible as a charitable contribution, but may be deductible as a business expense. ASA of Wisconsin estimates that \$400.00 of your dues is not deductible as a business expense due to lobbying activities on behalf of ASA members. Consult your tax advisor.