

**Association of Oklahoma General Contractors
636 NE 41st St., Oklahoma City, Oklahoma 73105
(405) 763-5200 FAX (405) 609-8814**

**APPLICATION FOR ASSOCIATE MEMBERSHIP
(Please Print or Type)**

COMPANY NAME: _____

MAIN OFFICE STREET ADDRESS: _____

POST OFFICE BOX: _____

CITY / STATE / ZIP CODE: _____

AREA CODE / TELEPHONE:() _____

FAX – AREA CODE / TELEPHONE: () _____

WEB PAGE ADDRESS: _____

COMPANY OFFICERS:

Name:	Title:	Magazine (<input type="checkbox"/> To Receive)	Mailing	Primary Contact (<input type="checkbox"/> One Only)
1. <input type="checkbox"/> _____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
E-Mail: _____				
2. <input type="checkbox"/> _____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
E-Mail: _____				
3. <input type="checkbox"/> _____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
E-Mail: _____				
4. <input type="checkbox"/> _____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
E-Mail: _____				
5. <input type="checkbox"/> _____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
E-Mail: _____				

BRANCH OFFICES (If Applicable):

MAILING ADDRESS: _____

CITY / STATE / ZIP CODE: _____

AREA CODE / TELEPHONE:() _____

FAX – AREA CODE / TELEPHONE: () _____

Branch Officers:

Name:	Title:	Magazine (<input type="checkbox"/> To Receive)	Mailing	Primary Contact (<input type="checkbox"/> One Only)
1. <input type="checkbox"/> _____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
E-Mail: _____				
2. <input type="checkbox"/> _____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
E-Mail: _____				
3. <input type="checkbox"/> _____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
E-Mail: _____				

What percentage of your firm's total business is with the Highway Construction Industry? _____

Does your Firm operate open shop, that is, without collective bargaining agreements:

(a) On all work _____ (b) On part of your work _____ (c) On none of your work _____

Please offer concise narrative of your firm's business (i.e. date of organization, etc.).

Was the Firm ever an associate member of the AOGC under its present name or by any other name? _____

If so, give name(s) of Chapter(s) and /or Branch (es) and date(s) of said membership along with the firm name used in enrollment _____

This Firm hereby makes application for associate membership to the Association of Oklahoma General Contractors, Highway/Heavy Branch, and the Associated General Contractors of America, on the basis of the foregoing statements. Name 2 references below who are personally familiar with your firm and its work.

This Firm certifies that the foregoing statements are correct and agrees, if elected to membership, that in accepting the privileges, it will also accept the obligations of Associate Membership, that it will be governed by the Articles of Incorporation and Governing Provisions of the Rules, Regulations and Dues Schedule of the AOGC as long as it continues as a member, and furthermore agrees to promote the objectives of the Association.

Chapter Dues:

Our associate membership dues are \$1000.00 per anniversary year.

Firm Name _____

By (Signed) _____

Title _____

Date _____

Dues paid to the Association of Oklahoma General Contractors are not deductible as charitable contributions. However, 85% of dues paid may be claimed as business expense for Federal Income Tax Purposes.

Federal I.D. 73-0132910

To better serve you, we are attempting to help our members locate the goods and services they need. We ask that each Associate Member indicate the classifications for which their firm is best described. Please check each box that may apply to your company.

ASSOCIATE MEMBERSHIP ROSTER CODES:

Type of Service Work Performed

(☑ One Only)

- Specialty Contractor: Firm that provides job site labor and is NOT a general contractor
- Supplier / Service Provider: Firm that supplies materials or services to general contractors.

(☑ Type of service provided)

- (A) Accounting
- (A/E) Architect-Engineer
- (AG) Aggregate Producer
- (ASP) Asphalt Producer
- (AS) Asphalt Supplier
- (B/F) Banking / Finance
- (B/S) Bonding/Surety
- (CP) Cement Producer
- (CS) Concrete Suppliers
- (C) Consultant
- (D/C) Demolition / Site Clearing
- (E) Environmental
- (E/T) Equipment /Tools
- (EX) Explosives
- (F) Fabrication
- (HR) Human Resources
- (IN) Insurance
- (M) Machinery
- (MS) Material Supplier
- (P) Petroleum
- (RC) Recycling Utilities
- (R) Rentals
- (S) Surveying
- (S/S) Sod / Seed
- (T) Testing
- (TR) Trucking

Due to the extreme diversities within our industry, we have found it difficult to list all possible service categories. Please list any services that your company provides that are *not* listed in the space provided below.
