



New York State Concrete Masonry Association

2017 PRODUCER AFFILIATE MEMBER APPLICATION

Company Name: _____

Address: _____ Date: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Fax: _____ E-mail: _____

First Representative Name: _____

Address, if different than above: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Fax: _____ E-Mail: _____

Second Representative Name: _____

Phone: _____ Fax: _____ E-mail: _____

Website: _____

2017 ANNUAL PRODUCER AFFILIATE INVESTMENT \$1705.00

CHECK TO ADD YOUR WEBSITE TO NYSCMA VIRTUAL MEMBER SHOWCASE: www.nyscma.org . \$150.00

INVESTMENT ATTACHED \$ _____

These dues rates are effective January 1, 2017 – December 31, 2017. The NYSCMA Board of Directors periodically reviews membership dues and may adjust the annual dues charge. Board approved adjustments would go into effect the following January 1st. Membership becomes effective the first day of the month following the date of this application and will continue indefinitely beyond one year unless written cancellation of membership is submitted.

Please make checks payable to NYSCMA; remit to 347 McKennan Road, Frankfort, NY 13340

Phone: 315-254-0518 Fax: 315-883-1342 E-mail: ncarparelli@nys-cma.org