



MEMBERSHIP APPLICATION

Fax, E-mail, or Mail your completed form & payment to:

Fax: (916) 641-1660 E-mail: vann@wccc.org Phone: (916) 599-8020

Mail: Western Council of Construction Consumers 1731 Howe Avenue #613, Sacramento, CA 95825-2209

Organization Name: _____

Primary Contact: _____

Title: _____

Address: _____

City/ST/ZIP: _____ Fax: _____

Phone: _____ E-mail: _____

Website: _____

Other Firm/Agency Representative(s) to receive Council correspondence: *(Attach sheet with all contact info)*

▶ If you have Multiple Offices: Attach a sheet listing address & main contact(s) for each, plus all contact info

PAYMENT METHOD: Check (# _____) Credit Card: Visa M/C AMEX Discover

Credit Card #: _____ Exp: _____ Amount: \$ _____

Name on Credit Card: _____ Security code: _____

Billing Address: _____

City/ State: _____ Zip: _____

Authorized Signature: _____

PRIVATE SECTOR OWNER:

Aerospace
 Biochemical/
 Pharmaceutical
 Co-Generation
 Manufacturing
 Telecommunications
 Healthcare
 Chemical
 Mining
 Refining
 Utility
 Developer
 Other _____

Annual Corporate Revenue	DUES
<input type="checkbox"/> 0 – \$50 Million	\$ 2,200
<input type="checkbox"/> \$50 - 250 Million	\$ 3,500
<input type="checkbox"/> \$250 Million – 1 Billion	\$ 4,800
<input type="checkbox"/> Over 1 Billion	\$ 8,950

ASSOCIATE MEMBER:

CONTRACTOR
 SUBCONTRACTOR

Annual Corporate Revenue	DUES
<input type="checkbox"/> 0 – \$1 Million	\$ 725
<input type="checkbox"/> \$1 – \$15 Million	\$ 1,250
<input type="checkbox"/> \$15 – \$100 Million	\$ 2,100
<input type="checkbox"/> \$100 M - \$1 Billion	\$ 2,300
<input type="checkbox"/> Over \$1 Billion	\$ 4,500

PROFESSIONAL SERVICES:

Legal
 Construction Management
 Program Management
 Architecture/ Design
 Engineering
 Commissioning
 Finance / CPA / Factoring
 Insurance / Bonding
 Training/Certification
 HR / Staffing / Drug Testing
 Consulting
 Other _____

Annual Corporate Revenue	DUES
<input type="checkbox"/> \$0 – \$500,000	\$ 350
<input type="checkbox"/> \$.5 - \$1 Million	\$ 725
<input type="checkbox"/> \$1 – \$5 Million	\$ 1,250
<input type="checkbox"/> Over \$5 Million	\$ 2,200

ALLIED MEMBER:

VENDOR/ SUPPLIER

Products/ Product Categories:

Annual Corporate Revenue	DUES
<input type="checkbox"/> 0 – \$1 Million	\$ 800
<input type="checkbox"/> \$1 – \$15 Million	\$ 1,375
<input type="checkbox"/> \$15 – \$100 Million	\$ 2,300
<input type="checkbox"/> \$100 M - \$1 Billion	\$ 2,525
<input type="checkbox"/> Over \$1 Billion	\$ 4,950

ASSOCIATION MANAGER: \$ 1,900

PUBLIC SECTOR OWNER:

Academic
 Government Agency
 Healthcare
 Transportation
 Other _____

DUES: \$ 1,900

SOLE PROPRIETOR DUES \$ 275
 < \$ 500,000 Annual Revenue

For Office Use Only:
 Received at WCCC: _____
 by: _____