

Company description check list (please check all that apply & indicate the certifying agency where applicable)

- Union Non-Union Family Owned SDVO _____ 8A _____
- MBE _____ WBE _____ DBE _____ SBE _____ SDVO _____
- Veteran Owned Business Service Disabled Business
- Other _____

If union, who are you signatory to? _____ Years in construction industry? _____

Primary work field (please rate by percentage – totals should add up to 100%)

_____ % Commercial _____ % Government _____ % Industrial
 _____ % Residential _____ % Institutional _____ % Other

Please indicate if your company...

- Bids on LEED Projects Has a LEED AP on Staff

Please provide the primary LEED AP contact information if applicable (include e-mail addresses):

Payment Information

Method of Payment: Visa Mastercard AMEX Check # _____

Credit Card Number: _____ Exp. Date: _____

Cardholder Name: _____ Security Code: _____

Cardholder Signature: _____

Participating on an ASA Chicago committee is a great way to increase the value of your membership. Please indicate the committee(s) in which you would have interest (please check all that may apply)

- Business Opportunity Golf Membership Social
- Construction Expo Government Relations Publications
- Education/Technology Marketing Safety/Insurance

Signature of Authorized Representative:

_____ Date: _____

Our strength is in numbers. Do you know any other company which may benefit from ASA Chicago membership?

Name/Title (who are you referring?) _____ Phone: _____

Company: _____

Address: _____ City/State/Zip: _____

Fax: _____ E-mail: _____

Please mail or fax this completed for with dues payment to:

Note: 12% of your dues cannot be deducted as a business expense, because that amount may be used for lobbying purposes.

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