



NEW YORK CONSTRUCTION MATERIALS ASSOCIATION, INC.
 11 Century Hill Drive
 Latham, NY 12110
 Phone: (518) 783-0909
 Fax: (518) 783-0969

APPLICATION FOR AFFILIATE MEMBERSHIP

Name of Company: _____

Main Office Address: _____

City: _____ State: _____ Zip: _____

Phone No. () _____ Fax No. () _____ E-Mail: _____

Number of Production Facilities: _____

Products: _____

Are your products approved for use under NYS Contracts: Yes _____ No _____

Following Persons are to be listed in the Association's Membership Directory:

<u>Name</u>	<u>Title</u>	<u>Email</u>	<u>Assn. Mailing List</u>
_____	_____	_____	Yes ___ No ___
_____	_____	_____	Yes ___ No ___
_____	_____	_____	Yes ___ No ___
_____	_____	_____	Yes ___ No ___
_____	_____	_____	Yes ___ No ___

Invoices should be directed to: Name : _____

Address: _____

Plant locations should be listed on a separate attached sheet as follows:

Plant Name: _____ Address: _____

City: _____ State _____ Zip _____ County: _____ Phone: () _____

Contact: _____ Title: _____

I have received and reviewed the Constitution and By-Laws of the New York Construction Materials Association and agree to abide by their terms and conditions.

Signed: _____ Title: _____

Print Name: _____ Date: _____