

EXCELLENCE SERVICE INTEGRITY

APPLICATION FOR MEMBERSHIP

Dues payments are not deductible as charitable contributions for federal income tax purposes. However, dues payments may be deductible as

Membership Category

□Builder □Associate Builder Members – Individuals or firms whose principal bus building/remodeling residential or commercial structures, or development.		lobbying activity. Please amount.	•		•		
development. Associate Members - Individuals or firms whose principal business is sub-		Payment					
contracting, supplying materials, service or support to the building		Builder Members	Annua	Annual Dues			Total
industry.		> \$3 million in gross re and/or > 30 lots develo		+	\$50	=	□ \$800
Do You Want More Information?		\$1 - \$3 million in gross r		+			□ \$650
☐ Insurance: ☐Group Health ☐Workers Comp ☐Liability		<\$1 million in gross re	venue \$395	+	\$50	=	□ \$445
□ Fueling Program		Associate Members	Annua	l Dues	PAC*		Total
□ Verizon Discounts		15 or more employees		+	\$50		□ \$800
□ Credit Card Processing Program		5 to 14 employees	\$600	+	\$50		□ \$650
☐ Advertising & Sponsorship Opportunities		< 5 employees	\$395	+	'		□ \$445
Annual dues include membership in the National Associatic Builders, Oregon Home Builders Association and Home Bui Association of Lane County.		* Political Action is a m housing industry's voic contribution is voluntar	e to be heard	in the politi	_		_
Firm Name	Representative			_Phone			
Firm AddressCi	ty	State2	<u>Z</u> ip	_Fax			
Mailing Address	CityZip_		Alternate Phone				
Email	Websit	e					
Type of Business	CCB#	(if applicable)		·			
BY SIGNING THIS APPLICATION, I AGRE ASSOCIATION. THIS APPLICATION FOR OF THE HOME SignedDat	MEMBERSHIP 1 BUILDERS AS	IS SUBJECT TO APPRO SOCIATION OF LANE C	VAL BY THE OUNTY.	BOARD	OF DIR	RECT	
Make checks payable to "Home Builders Association	(HBA) of Lane Co	ounty" or use \square Visa or \square	Mastercard.				
Credit card #	Ехр	DateCVV	2#(on the back s	ignature panel	0		
Billing Address for Card Statement(num	eric portion only)		Zip_			_	
Cardholder Signature_ (By signing, I authorize ar Return completed application to Home Bu	nd agree to pay for ilders Association				ie OR 97	'404)