



WISCONSIN ROOFING
CONTRACTORS ASSOCIATION

www.wrcaonline.org

APPLICATION FOR ASSOCIATE MEMBERSHIP

Firm Name _____

Street Address _____

P.O. Box _____

City _____ State _____ ZIP _____

Phone (____) _____ Fax (____) _____

E-mail _____ Web _____

Recommended by: _____

Individual(s) authorized to represent the firm:

<u>Name</u>	<u>Title</u>
_____	_____
_____	_____
_____	_____
_____	_____

Type of Business _____

Date _____ Authorized Signature _____

Title

Return to: **Wisconsin Roofing Contractors Association, Inc.**
660 East Mason Street
Milwaukee, WI 53202-3877
(414) 227-1230 Fax (414) 227-1290

Membership dues of \$300 enclosed.