



APPLICATION FOR ASSOCIATE MEMBERSHIP

Firm Name _____

Main Office Address _____

City _____ State _____ Zip Code _____

Telephone _____ FAX _____ Web Site _____

Products and Services _____

North Carolina References (please list two) _____

Officers of Firm

Name _____ Title _____

Mailing Address _____

City _____ State _____ Zip Code _____

Telephone _____ FAX _____

Email _____

Name _____ Title _____

Mailing Address _____

City _____ State _____ Zip Code _____

Telephone _____ FAX _____

Email _____

Please make copies for additional officers as needed

Plants or Branches in North Carolina:

Contact _____ Title _____

Usually the Manager

Email _____

Mailing Address _____

City _____ State _____ Zip Code _____

Telephone _____ FAX _____

Please see page 2 for additional Plants or Branches

Mail or email completed form to:

NC Aggregates Association

P. O. Box 30603

Raleigh, NC 27622-0603

ncaa@ncaggregates.org

Phone: 919.782.7055



APPLICATION FOR ASSOCIATE MEMBERSHIP

Plants or Branches in North Carolina continued

Contact _____ Title _____

Email _____

Mailing Address _____

City _____ State _____ Zip Code _____

Telephone _____ FAX _____

Contact _____ Title _____

Email _____

Mailing Address _____

City _____ State _____ Zip Code _____

Telephone _____ FAX _____

Contact _____ Title _____

Email _____

Mailing Address _____

City _____ State _____ Zip Code _____

Telephone _____ FAX _____

Individuals, firms or companies not actively engaged in the production and/or sale of aggregates but who serve the industry with products or services are eligible for Associate Membership. The Annual Membership Dues, set by the Board of Directors, are calculated as follows:

Dues based upon date of submitting application.

January – March	\$1,130	August	\$ 475
April	\$ 855	September	\$ 380
May	\$ 760	October	\$ 285
June	\$ 665	November	\$ 190
July	\$ 570	December	\$ 95

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