



MEMBERSHIP APPLICATION

For internal use only
 Date: _____
 Number: _____
 Subsidiary Company

The undersigned hereby makes application for membership in the Builders Exchange of Michigan, agreeing, if accepted, to abide by the rules and regulations of the organization.

Company Name:		Year Est:
Address:		
City:	State:	Zip:
Mailing Address (If different):		
Telephone :	Fax:	800#:
Website:	Company Email:	
Company Type:		
Short Description of Business:		
Labor Affiliation: <input type="checkbox"/> Union <input type="checkbox"/> Non-Union <input type="checkbox"/> Merit Shop <input type="checkbox"/> Other		Minority Type: <input type="checkbox"/> DBE <input type="checkbox"/> WBE <input type="checkbox"/> MBE <input type="checkbox"/> Not Applicable
Company's Principal Officer & Title:		
Primary Contact:	Title:	
Contact Email Address:	Telephone:	

Reasons for Joining: Reporting Service Internet Planroom Membership Directory & Online Buyers Guide Listing
 Insurance Fleet & GM Vehicle Programs Other _____

Membership Levels & Terms (Please check appropriate box)

Standard Membership \$449 annually*

Includes online statewide coverage reporting service **without** access to plans, specs, and addenda

Upgraded Membership \$1074 annually*

Includes online statewide coverage reporting service **AND** view, print, and download plans, specs, and addenda

Application fee of \$125.00 and Membership payment is due in full with this application. Our membership year runs from January 1st to December 31st and automatically renews on an annual basis unless written cancellation is received prior to January 1 of the renewal year. Membership is for individual companies that are involved in the construction industry and will be considered by the Board of Directors at their next scheduled meeting. _____ Initial*

This is a company membership and only direct employees of the company may use the services of the Builders Exchange of Michigan for the direct benefit of the company. Companies with "common ownership" or "sister companies" must have their **own** membership to use said services. **Sharing access with non-members is strictly forbidden. Please see User Agreement on website.** _____ Initial*

By paying your yearly membership dues, you understand and agree that the Builders Exchange may, without waiving any of its other rights, at its option to cancel or amend any benefit or service you, your company, and employees participate in if you later decide to drop membership or are in financial arrears in any way. Membership dues are non-refundable. _____ Initial*

If your company is in financial arrears to the Builders Exchange you understand that all services and benefits through the Builders Exchange may be suspended until full payment is received with no credit forthcoming. _____ Initial*

Signature _____ Date _____

Printed Name _____ Title _____

Return completed application form to:

Builders Exchange of MI, PO Box 2031, Grand Rapids, MI 49501 **OR** by email to **Debbie@grbx.com**.

*Please call 616-949-8650 for pro-rated pricing.