Office use only					
Date:					
New Member					
Member Update					
Resignation					
Member #:					
National ID:					

## Membership Application and Update Form



Office use only
Section:
Full Member
Provisional
Non-Home
AssociateType
Worker's Comp Member

Company Name:						
Contact Person: #1 _	Title:					
Email:				Cell Phone #:		
Contact Person: #2 _						
Email:						
Additional Contacts	to be added to a	Alabama a	and National AG	(must have all information to add, use back	of formif needed)	
Name	Tit	tle		email		
Name	Tit	tle		email		
Name	Tit	tle		email		
Mailing Address:						
City:	State:			Zip:		
Street Address:						
City:	State:			Zip:		
Phone:	Fax:		Website	:		
By providing the inform AGC and The Associat				unication sent by or on behal lephone, fax or email.	f of the Alabama	
Was the firm ever a mem	nber of AGC under	its present r	name or any other na	ame?		
			New Full Membe			
State General Cor	ntractor's Lice	nse Num	ıber:			
Primary Construct	tion Type:					
Other Construction	n Types Perfo	ormed (ci	ircle all that ap	ply):		
Building	Highway	Heavy	Industrial	Municipal Utilities	Railroad	
		For Ne	ew Associate Men	nbers		
Briefly describe th	ne scope of yo	our work:	:			
				Cardia Carra Distrib		

Type: (circle one only) Subcontractor Manufacturer/Supplier Service Company Distributor/Dealer

**SELECT ONE**: I would like to be a member of the following section:

Birmingham East (Anniston/Oxford) West (Tuscaloosa) Central (Montgomery)

Dothan North (Huntsville area) Florence/Shoals Mobile

Completed applications may be faxed to 205-451-1499 or emailed to <a href="mailto:JennaD@alagc.org">JennaD@alagc.org</a>
To mail with payment mail to Alabama AGC P.O. Box 102066 Irondale, AL 35210
If you have any questions, please contact Jenna Davis at the Alabama AGC at 205-451-1440.