Application for SMACNA Membership

INTERNATIONAL AFFILIATE

☐ **Direct** ☐ **Through Chapter:**

_____
(Chapter Name)

Please complete all sections | * Indicates required field

Our firm hereby makes application for membership in the Sheet Metal and Air Conditioning Contractors' National Association, Inc. (SMACNA):

***Firm Name:** _____

***Firm Address:** _____

***City:** _____ ***State:** _____ ***Postal Code:** _____

☐ Physical Address ☐ Mailing/Shipping Address ☐ Billing Address

Alternate Firm Address: _____

Firm Email: _____ **Firm Phone:** _____

Firm Website: _____ **Fax:** _____

***Primary Contact (PC):** _____ ***Title:** _____
(First Name) (Last Name)

***PC's Email:** _____ **PC's Mobile Phone:** _____

***1. Are you a parent company with subsidiaries?** ☐ Yes ☐ No

If yes, please give the name(s) and location(s) of any subsidiary:

_____

***2. Are you a subsidiary to a parent company?** ☐ Yes ☐ No

If yes, please give the name and location of the parent company:

_____

***3. Does your firm sell products or services to customers in the U.S. or Canada?** ☐ Yes ☐ No

If yes, list the names of any related businesses (i.e. distributors) in the U.S. and/or Canada:

_____

***4. What year was your firm established?** _____

For each type of work your firm performs, please indicate the approximate percentage of your total work it represents:

Architectural Sheet Metal	____ %	Industrial Sheet Metal	____ %
BIM/CAD/Drafting/Detailing	____ %	Kitchen/Food Service	____ %
Building Envelopes	____ %	Mechanical	____ %
Commercial HVAC	____ %	Residential HVAC	____ %
Commercial Service	____ %	Residential Sheet Metal	____ %
Custom Fabrication	____ %	Specialty Metals	____ %
Duct Cleaning	____ %	Testing & Balancing	____ %
Duct Fabrication	____ %	Other: _____	____ %

Membership Costs

Member Type	One-Time Initiation Fee	Annual Membership Fee	IFUS Hourly Rate
International Affiliate (Chapter)	$1,000 USD	$400 USD	N/A
International Affiliate (Direct)	$1,000 USD	$1,500 USD	N/A

As a member of SMACNA we agree to abide by the Constitution & Bylaws of the Sheet Metal and Air Conditioning Contractors' National Association, Inc., which can be read here: www.smacna.org/about-smacna/constitution-bylaws. The required dues and fees will be remitted in accordance with policies and procedures established by SMACNA.

Primary Contact Signature _____ **Title/Position with Firm** _____

Print Name _____ **Date** _____

RETURN COMPLETED FORM TO:
SMACNA Membership Department
VIA EMAIL:
membership@smacna.org
OR USPS:
4201 Lafayette Center Drive
Chantilly, VA 20151-1219

FOR SMACNA USE ONLY
Date Received: _____
Check Number: _____
Amount Received: _____