



# NFCA CONTRACTOR MEMBERSHIP BRANCH LOCATION APPLICATION

To qualify for NFCA Contractor Membership as a branch location, companies must have completed 2 years and 20 jobs in the passive fireproofing business OR have passed the IFRM/ SFRM exam, and have NFCA board approval to join. Contractors who do not meet these requirements may apply for Interim Contractor Branch Membership until the requirements are met.

**Company—Please print exactly as it is to appear on the Membership List at [www.NFCA-online.org](http://www.NFCA-online.org)**

Name of Company: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Country: \_\_\_\_\_  
Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
Company E-mail: \_\_\_\_\_ Website: \_\_\_\_\_  
Date/Year company was established: \_\_\_\_\_

**Primary representative (only the name and e-mail is listed in the Member List)**

Name: \_\_\_\_\_ Title: \_\_\_\_\_  
E-mail: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

**Parent Company (Annual Membership Fee must be current)**

Legal Name of Parent Company: \_\_\_\_\_  
Contact Name/Number: \_\_\_\_\_  
Website: \_\_\_\_\_

**Other representatives to receive NFCA updates and industry information**

Name: \_\_\_\_\_ Title: \_\_\_\_\_  
E-mail: \_\_\_\_\_  
  
Name: \_\_\_\_\_ Title: \_\_\_\_\_  
E-mail: \_\_\_\_\_

(Please list as many names as you like on a separate sheet.)

**Types of work for which you contract—check all that apply**

Spray-applied Fireproofing    Intumescent Fireproofing    Firestopping    Spray Foam    Air Barrier  
 Curtain Wall Insulation    Drywall    Thermal Barrier    Plaster  
Other: \_\_\_\_\_

**What other Industry Affiliates are you a member?**

Industry memberships:  ABAA    FCIA    ICAA    NIA    SWRI   Other \_\_\_\_\_

**List of 20 Completed Fireproofing Jobs**

Please provide a list of 20 completed fireproofing jobs, the location, and the fireproofing product used, with this application.

**Your Company Description to be used on the NFCA Member List**

Provide a brief paragraph describing your company’s business and include your service area. This description will be used on your NFCA Member Listing at NFCA-online.org: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**NFCA-online.org Contractors by State/Provinces Listing Fee**

NFCA Members are also listed on the website under the states they serve so potential customers looking for a NFCA Contractor can click on a state and find the contractors who work in the state. NFCA Contractor Members may choose to be listed under the multiple states/provinces they serve for the following fee: 2 states —Free with Branch Membership, 3 to 5— \$100 each, 6 to 10—\$80 each, 11 to 15—\$70 each, 16 to 20—\$60 each, 21 and over \$50 each.

Please list the states/provinces to be listed for your company on NFCA-online.org: \_\_\_\_\_

\_\_\_\_\_

**Payment—Branch Annual Membership \$325, includes 2 free state listings**

\_\_\_ Check made payable to NFCA is attached.

\_\_\_ Invoice my company.

\*\*Branch Membership application is not complete until Parent company is confirmed and payment is received in full.

\_\_\_ Credit Card: Card number \_\_\_\_\_ Expiration date \_\_\_\_\_ Security Code \_\_\_\_\_  
Name on Card \_\_\_\_\_ E-mail \_\_\_\_\_

I hereby make application for membership in the National Fireproofing Contractors Association as a Voting Contractor Member. If approved for membership, I agree to accept and abide by all of the By-Laws now in force and as amended from time to time. In making application for membership, I hereby waive all claims against the Association, its officers, directors and all members arising out of any act in connection with the acceptance or rejection of this application, or any action taken by the Board of Directors of the Association. Further, I hereby certify all information in this application is true, complete and correct to the best of my knowledge.

Signature of Owner, Officer or Partner: \_\_\_\_\_

Print Name: \_\_\_\_\_ Title: \_\_\_\_\_ Date: \_\_\_\_\_

**Return completed application, list of jobs and payment to:**

**National Fireproofing Contractors Association**  
800 Roosevelt Rd., Bldg. C-312, Glen Ellyn, IL 60137  
lissettek@cmservices.com  
Questions? Call 708-236-3411



In the event this application is accepted, as partial consideration for my membership, I give National Fireproofing Contractors Association, its assigns, licensees, successors in interest, and legal representatives, the irrevocable right to use any photographs and/or video of me taken at any NFCA events in all forms and in all media and in any manner for advertising, trade, promotion, exhibition, or any other lawful purposes; and I waive any right to inspect or approve the materials incorporating my likeness, including written copy that may be created and appear in connection with such photos and/or video.