



Associated General Contractors of Colorado

Membership Application – Supplier

PLEASE TYPE OR PRINT:

Company Name:

Year Founded:

Web Site:

NAICS:

Mailing Address:

Suite Number:

City: State: Zip:

Phone: () **Fax:** ()

Physical Address:

Suite Number:

City: State: Zip:

Directory and Website Information: (up to four can be listed)

Primary Contact: Nickname:

Title: Email:

Phone: () Ext.

Name: Title:
Email: Phone: ()

Name: Title:
Email: Phone: ()

Name: Title:
Email: Phone: ()

Company Description (25 words or less):

How did you learn about AGC/C?

Were you referred by an AGC/C member? If yes, please give their name and company:

DUES CALCULATION

Annual Dues . . . \$835.00

Name: Title: Date:

Signature: Amount Enclosed: \$

AGC dues are deductible on your Federal tax return as an ordinary and necessary business expense per IRS code Section 162(e)

Please complete the following:

Benefits

Contact Person:
Title:
Direct Phone:
Email:

Human Resources

Contact Person:
Title:
Direct Phone:
Email:

Business Development

Contact Person:
Title:
Direct Phone:
Email:

Information Technology

Contact Person:
Title:
Direct Phone:
Email:

Education/Training

Contact Person:
Title:
Direct Phone:
Email:

Marketing

Contact Person:
Title:
Direct Phone:
Email:

Estimating

Contact Person:
Title:
Direct Phone:
Email:

Purchasing

Contact Person:
Title:
Direct Phone:
Email:

Fleet Management

Contact Person:
Title:
Direct Phone:
Email:

Safety

Contact Person:
Title:
Direct Phone:
Email:

Would your company like to have a representative participate in any of the following areas of interest as opportunities become available?

	Name	Email
Career Development		
Education		
Environmental		
Future Leaders Steering Committee		
Legal		
Legislative		
Marketing		
Member Services		
Membership		
Public Relations		
Safety		
School To Career		
Technology		

To properly classify your company in the directory and on the web, please select the category(s) which best defines where your firm. If the category is not listed, please include at the bottom of the listing. Based upon response, the category will be reviewed for inclusion.

Accounting / Auditing		Glass & Glazing	
Aggregates/Quarrying		Hazardous Material Remediation	
Associations		Health Services	
Benefits		Instrumentation	
Building Inspection Service		Insulation	
Building Permits		Insurance and Bonding	
Carpentry		Landfills and Transfer Stations	
Ceilings		Landscaping	
Claims Analysis		Legal Services	
Commercial Banking		Marketing & Public Relations	
Communications		Masonry	
Computer Equipment		Mechanical	
Computer Software		Metals	
Concrete		Municipal Approvals	
Concrete Cutting and Drilling		General Requirements	
Construction Offices		Glass & Glazing	
Construction Site Cleanup		Occupational Medicine	
Consultants		Ornamental Metal	
Conveying Systems		Owner Representation	
Doors and Windows		Paints & Coats	
Drug Testing		Payroll Processing	
Drywall and Acoustical Ceilings		Plan Rooms	
Electrical		Portable Restrooms	
Employment Service		Pre-employment Screening	
Engineering		Pre-Engineered Structures	
Environmental Service		Printing	
Equipment		Project Management	
Equipment Financing		Public Administration	
Equipment Leasing		Real Estate Acquisitions	
Equipment Sales		Real Estate Development	
Fencing		Real Estate Investments	
Financial Planning		Recycling	
Finishes		Roofing	
Fleet Management		Occupational Medicine	
Flooring		Ornamental Metal	
Furnishings		Safety Services	
General Contractor		Scaffolding	
General Contractor – Commercial & Institutional		Schedulers	
General Contractor – Industrial		Security	
General Contractor – Multi Family		Sheet Metal	
General Contractor – Public Works		Shoring and Underpinning	
General Contractor – Tenant Finish		Site Work	
General Requirements		Special Construction	
		Specialists	

Storage		Tracking Systems	
Structural Metal Framing		Truck Maintenance and Repair	
Sweeping		Truck Sales and Leasing	
Technology Support		Utilities	
Terrazo		Waste Removal	
Thermal & Moisture Protection		Welding	
Tile		Workers Comp	

Branch locations to be listed in the directory and website: please attach a separate listing providing the following:

Company name *if different from primary name*
 Complete mailing address
 Complete physical address
 Telephone

Contact Person
 Title
 Email
 Fax

For Office Use:

Ambassador Assigned: _____
 Company: _____
 Phone: (____) ____ - _____ Ext. _____
 Email: _____

\$	Ck #	Date	DB []	Web []	QuickClick []	ON Site []	Letter []
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info@agccolorado.org

AGC of Colorado

www.agccolorado.org