



## MEMBERSHIP APPLICATION

Mailing Address: 609 S. Knik Goose Bay Road, Suite G  
 Wasilla, Alaska 99654  
 (907) 376-2620 Office  
 (907) 376-2667 Fax

Please take a few moments to read through this application thoroughly. Please answer all questions and either type or print legibly. The information provided will be used in our membership directory and database. If you have any questions, please contact our Executive Officer at 376-2620.

COMPANY NAME: \_\_\_\_\_

DESIGNATED REPRESENTATIVE: \_\_\_\_\_

Mailing Address (we will send newsletters to this address): \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Business Phone: \_\_\_\_\_ Fax Phone: \_\_\_\_\_ Cellular Phone: \_\_\_\_\_

Email address: \_\_\_\_\_ Web site: \_\_\_\_\_

**Do you wish to have your cellular phone # included in the Directory?** \_\_\_\_\_

Company Specialties: (1) \_\_\_\_\_ (2) \_\_\_\_\_ (3) \_\_\_\_\_

**IF APPLYING FOR A BUILDER MEMBERSHIP, YOU MUST ATTACH A COPY OF YOUR CONTRACTOR'S LICENSE.**

You're Sponsor (this is the person who invited/informed you about MSHBA): \_\_\_\_\_

**Are you willing to serve on a Committee?** \_\_\_\_\_ If yes, which of the following interest you?

Home Show _____	Membership _____	Scholarship _____
Education _____	Legislative _____	Ethics _____
Nominating _____	Christmas Party _____	Fall Or Spring Showcase _____

***I agree to abide by the Constitution and By-Laws of the Mat-Su Home Builders Association to which this application is directed, of the National Association of Home Builders of the United States with which it is affiliated, and of the Alaska State Home Builders Association. I also authorize the Mat-Su Home Builders Association to verify any personal references. The signature on this application will serve as authorization to do so.***

**Please Provide Three Business or Personal References:**

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

**Date:** \_\_\_\_\_ **Signature:** \_\_\_\_\_

**Enclosed is my remittance of:**

\_\_\_\_\_ \$482 for Associate Membership \_\_\_\_\_ \$532 for Builder Membership

\_\_\_\_\_ \$50.00 for Affiliate Program (Additional membership to already existing Associate or Builder)

**To Qualify for Affiliate Membership you must identify the Company you are applying under:** \_\_\_\_\_