



## ICFA 2008 Membership Application

Company Name: \_\_\_\_\_

Member Type ( see below): \_\_\_\_\_

**Company Business Address** (Provide information exactly as you wish it to appear in ICFA's published lists)

Primary Contact Name: \_\_\_\_\_ Title: \_\_\_\_\_

Street Address \_\_\_\_\_

City: \_\_\_\_\_ State/Province: \_\_\_\_\_ Zip/ Postal Code: \_\_\_\_\_

Country \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

E-Mail: \_\_\_\_\_

Website: \_\_\_\_\_

**Mailing Information:**  **Same as Physical Address**

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State/Province: \_\_\_\_\_ Zip/ Postal Code \_\_\_\_\_

Country \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

E-Mail: \_\_\_\_\_

### Additional Contacts

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Phone: \_\_\_\_\_ e-mail: \_\_\_\_\_

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Phone: \_\_\_\_\_ e-mail: \_\_\_\_\_

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Phone: \_\_\_\_\_ e-mail: \_\_\_\_\_

### Web Log-on Info (min. 6 characters each)

User Name \_\_\_\_\_

(your e-mail): \_\_\_\_\_ Password \_\_\_\_\_

**Description of company business as you would like it to appear in ICFA listings:** (Max. 75 words)

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### Additional State Listings (\$25 each)

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**ICFA dues may be deductible as professional or business expenses, to the extent allowable by law. Dues and other payments to ICFA are not deductible as charitable contributions for US federal income purposes.**

**Membership Dues Category (check one):**

- Primary Member.** Includes manufacturers and marketers of brand name insulating concrete form systems in North America. Dues for Primary Members for 2008 are in four tiers. Please contact the ICFA office for further information. Must complete shipment report for Primary Membership.
- Contributing Associate Member.** Includes raw material suppliers, such as EPS bead manufacturers, cement producers, and other suppliers of materials, equipment, information and services to the ICF industry. Dues are \$5,000 for the 12 months following receipt of payment.
- Associate Member.** Includes suppliers of materials, equipment, and services to the ICF industry. On a voluntary basis, Contributing Associate and Associate Members conduct programs and fund special projects that support the ICF industry. Dues are \$3,000 for 12 months following receipt of payment.
- Ready-Mix Member.** Includes ready-mixed concrete companies who support the goals of the ICFA. Dues are \$500 for the 12 months following receipt of payment.
- Distributor Member.** Companies whose main business is to distribute insulated concrete forms. Dues are \$250 for the 12 months following receipt of payment.
- Contractor Member.** Companies whose main business is to install insulated concrete forms. Dues are \$200 for the 12 months following receipt of payment.
- Professional Member.** Individuals who support the industry with their work in such areas as architectural design, publications, consulting, research, building codes, and government. Dues are \$350 for the 12 months following receipt of payment.
- Student Member.** Fulltime students actively participating in a degree driven program at a university or college. *Evidence of current, full-time student registration must be submitted with application or renewal.* Dues are \$25 for the 12 months following receipt of payment.

| <b>Membership DUES</b>    |                                    |    |
|---------------------------|------------------------------------|----|
| Membership Category       | @ \$                               | \$ |
| Additional State Listings | @ \$ 25.00 each additional listing | \$ |
| <b>TOTAL</b>              |                                    | \$ |

Make Checks & Money Orders in US Dollars payable to **Insulating Concrete Form Association**  
 or *charge to:*  **American Express**    **MasterCard**    **Visa**

|                            |  |                   |  |
|----------------------------|--|-------------------|--|
| <b>Name on Card:</b>       |  |                   |  |
| <b>Credit Card Number:</b> |  |                   |  |
| <b>Expiration Date:</b>    |  | <b>Signature:</b> |  |

**Mail or Fax Completed Membership Form & Payment To:**

Insulating Concrete Form Association, 1730 Dewes Street, Suite #2, Glenview, IL 60025 Fax: 847-657-9728  
 Toll-Free: 888-864-4232 Website: [www.forms.org](http://www.forms.org) Email: [info@forms.org](mailto:info@forms.org)

**By signing this document you certify that all statements on this application are correct.**

\_\_\_\_\_  
**Signature of Applicant**

\_\_\_\_\_  
**Company**

\_\_\_\_\_  
**Date**