



I/We hereby make an application for membership in the Fayetteville Area Plumbing Contractors Association.

I/We agree to be governed by the By-Laws of this Association and to the betterment of the plumbing profession either through legislation or general education of the public and through related community service projects.

I/We agree to attend in person or by representation, if possible, all monthly meetings of this Association.

FIRM NAME _____ PHONE # _____

PARTICIPANT NAME (S) _____

MAILING ADDRESS _____

CITY/STATE _____ ZIP CODE _____

SIGNATURE _____ DATE _____

STATE LICENSE # _____ PHONE _____

EMAIL ADDRESS: _____

***email business logo for the association's website to to fayettevillarea@gmail.com**

Annual dues are \$250 and include dinner at our monthly meeting for one member per membership. Additional memberships may be purchased at any time for multiple participants. The membership year runs from January 1 to December 31.