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 Bloomfield Hills, MI 48302-3204
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334 South Water Street
 Saginaw, MI 48607
 (989) 754-4872, Fax 989-752-7109

APPLICATION FOR CORPORATION MEMBERSHIP

Firm Name _____

Phone _____ FAX _____

Website: _____ Email: _____

Address _____
(Street)

_____ (City) _____ (State) _____ (Zip Code)

(Mailing Address - If Different from Above)

Contact Name _____ Title _____

Type of Business _____ Company CSI Code _____

President/CEO _____ Chief Estimator _____

Chief Financial Officer _____ Chief Officer of Operations _____

Marketing Manager _____ Educational Contact _____

Advertising Manager _____ Date Organized ____ / ____ / ____

Avg. No. Salaried Employees (choose range)...

1-10 21-30 41-60 71-100 126-150
 11-20 31-40 61-70 101-125 151-200 201 and over

Approximate Sales Volume (choose range)...

\$10,000 - \$50,000 \$250,000 - \$500,000 \$5 million - \$10 million
 \$50,000 - \$100,000 \$500,000 - \$1 million \$10 million - \$20 million
 \$100,000 - \$250,000 \$1 million - \$5 million \$20 million and over

Are you a Woman Business Enterprise? Yes No

Are you a Minority Business Enterprise? Yes No

We hereby make application for membership in the Construction Association of Michigan effective upon receipt of this application by the association. Submitted with this application is our payment for the annual dues and a one time initiation fee. Upon acceptance by the CAM Board of Directors we agree to abide by the association's bylaws.

We understand that to remain a member in good standing, payments for dues and services must be made on or before our expiration date. Failure to do so will result in the cancellation of all CAM member services.

Signed by _____ Title _____ Date ____ / ____ / ____

What is your main reason for joining CAM? _____ How did you hear about CAM? _____

Would you consider serving on a committee? yes no

Approved by _____ Date ____ / ____ / ____

Submitted by _____
(Membership Representative)

FAX TO 248-972-1001