

**SOUTHERN TIER BUILDERS ASSOCIATION, INC.**

65 East Main Street Falconer, NY 14733

(716) 665-4026

**APPLICATION FOR MEMBERSHIP**

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

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

City: \_\_\_\_\_ County: \_\_\_\_\_ State: \_\_\_\_\_

ZIP: \_\_\_\_\_

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

E Mail Address: \_\_\_\_\_ Web Address: \_\_\_\_\_

Number of Employees \_\_\_\_\_

Name of owner(s), Partners or Officers of Corporation: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Name of person to whom communications should be addressed: \_\_\_\_\_

State Type of Business your company is engaged in: \_\_\_\_\_

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I (we) certify that the foregoing statements are correct and hereby make application for membership in the Southern tier Builders Association, Inc.

I (we) agree to promote the objectives of the Association to the best of our ability and to comply with the appropriate sections of the constitution and By-laws, it being understood that those sections relating to collective bargaining agreements between the Association and unions are not applicable to this membership.

Date: \_\_\_\_\_

Signed: \_\_\_\_\_

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

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**FIRST PAYMENT MUST ACCOMPANY THIS APPLICATION**

Membership classification \_\_\_\_\_ list Trade/Trades your company is involved in

\_\_\_\_\_

Sponsoring Member: \_\_\_\_\_ Date received: \_\_\_\_\_

Action taken by Executive Board \_\_\_\_\_ accepted \_\_\_\_\_ rejected date: \_\_\_\_\_

*This application is subject to approval by the Board of Directors of the Southern Tier Builders Association, Inc. (STBA). Should you at any time decide to cancel or not renew your membership, notification of such cancellation or non-renewal must be presented to the STBA in writing on or before January 31<sup>st</sup> of the calendar year. Failure to notify the STBA of non-renewal or cancellation of membership will cause your dues to be prorated accordingly.*