MEMBERSHIP APPLICATION

THE POWER OF 3 . . .
THE CONVENIENCE OF 1

When you join the BIA of Stark & East Central Ohio, you receive the benefit and support of two other associations as well.

NAHB, National Association of Home Builders

◊ Federal legislative representation
◊ Critical news and information, education, programs and services
◊ National Housing Resource Center, builderbooks.com, and other informational advantages
◊ Specific council membership: Development, Green Building, Remodeling, Sales and Marketing
◊ Technical assistance on code, environmental, labor, safety and health issues

OHBA, Ohio Home Builders Association

◊ Statewide lobbying and watchdog for political issues
◊ Growth advocate for our industry

MEMBER BENEFITS

Marketing & Business Development
Parade of Homes
Home & Garden Show
Spring & Fall Circuit of New Homes
Sales and merchandising awards
Various consumer events
Exclusive advertising opportunities

Networking & Training
Industry Night
Golf Outing
Social mixers with builders, suppliers & subcontractors
Classes and CEUs for builders, architects & realtors
Lead RRP training courses
Sales and marketing courses
Green Building Certification
Remodeling Certification
OSHA and EPA courses and training
Legal programs and consultation
Codes and development issues

Money Saving Benefits
Workers’ Compensation (save thousands!)
Verizon Wireless (up to 22% savings!)
GM discount of $500
Member to Member Discount Program
Fuel discounts

Government Relations
Constant local lobbying efforts (state & federal, too)
Close contact with elected and appointed officials
Political fundraisers
Zoning/building appeals
Code interpretation assistance
MEMBERSHIP APPLICATION

COMPANY NAME:_____________________________________________ # of years in business________

TYPE OF PROFESSION
PRIMARY ACTIVITY_________________________________ SECONDARY ACTIVITY_________________________________

BUSINESS ADDRESS:_____________________________________________________________________________
________________________________________________________________________________________________

CITY, STATE, ZIP:_______________________________________________________________________________

PHONE:________________________________________ FAX:___________________________________________
E-MAIL:_________________________________________ WEBSITE:________________________________________
(print one e-mail only)

REPRESENTATIVE:______________________________________ TITLE:____________________________________

BIA SPONSOR:________________________________________

Please check one of the following types of membership:
_____ BUILDER MEMBERSHIP ($610 + $25 initiation fee = $635)
(My principal business has been new construction for at least one year)
_____ Sample contract enclosed (required to process Builder membership)

_____ ASSOCIATE AND REMODELER MEMBERSHIP ($510 + $25 initiation fee = $535)
(Remodelers and those businesses that provide essential supplies or services to benefit builder members in
furtherance of construction or remodeling)

_____ FRIENDS OF THE ASSOCIATION MEMBERSHIP ($510 + $25 initiation fee = $535)
(A “non-allied trade, industry or profession” who endeavors to be supportive of the building industry)

Applicant’s company must already be a Builder or Associate member in order to join the Sales & Marketing Council:

_____ SALES & MARKETING COUNCIL ($75 fee)

□ Yes, please enroll me in the Verizon Wireless 22% discount Plan.  (This savings could pay for your membership!)
My Verizon cell phone number is _______________________.  My email address is __________________________.

PLEASE PROVIDE US WITH YOUR WORKERS’ COMPENSATION INFORMATION.
The BIA and its agents have been retained to review and perform studies on certain Workers’ Compensation matters on our
behalf.  This limited access is provided to review risk files, claim files and rated experiences only in order to obtain a quote of
possible group rating savings.

BWC Policy Number________________________________
Signature:________________________________________ Date:_____________________

CHECK OR CREDIT CARD INFORMATION MUST ACCOMPANY APPLICATION TO PROCESS.

MC   Visa   Disc   AMEX

Name on Card________________________________________ Card’s Mailing Zip Code___________________________

Card #_____________ Exp.______ Signature________________________

Accepted by Board of Directors:________________________ Date:________________________