

**SHEET METAL & AIR CONDITIONING CONTRACTORS ASSOCIATION
OF NEW YORK CITY, INC.**

16 Court Street - Suite 2100
Brooklyn, NY 11241

Phone: 718-624-4600

Fax: 718-855-9468



APPLICATION FOR ASSOCIATE MEMBERSHIP

(PLEASE PRINT ALL INFORMATION CLEARLY)

We hereby make application for Associate Membership in the Sheet Metal & Air
Conditioning Contractors Association of New York City, Inc. (NYC SMACNA)

FIRM NAME _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

TELEPHONE _____ FAX _____ E-MAIL _____ WEBSITE _____

What is your firm's business (i.e. architect, engineer, supplier, etc.):

Names of Owners and/or Officers
(Please list titles.)

**Names of SMACNA Contractors
With Whom You Do Business**

**Individuals who may be representing your firm at various Association meetings
and activities:**
(Other than those indicated above.)

Associate Membership is open to an individual, partnership, or corporation engaged in any facet of the HVAC industry. This application shall represent an agreement on the part of the applicant, if accepted, not to engage in any conduct detrimental to the Association or its members. Associate members shall have no vote in Association matters. Associate membership in NYC SMACNA does not convey membership in the National SMACNA Association. Associate Membership shall be subject to review and approval of the Sheet Metal & Air Conditioning Contractors Association of New York City, Inc.

Dated: _____

(Please print name and title.)

3/06

(Signature)