

2023 Associate Membership Application

Contact Name:	Title:		
Company Name:			
Address:			Date:
City:			
	Fax:		
	Website:		
Type of Associate Member			
Wholesaler Manufacturer	Manufac	turer's Rep	Other
If Other is checked, please specify what PHCC related field:			
If other is encered, preuse speeny what if nee related neid.			
Member Benefits:			
Access to PHCC of MA Contractor Member information for direct mail application			
 Access to infect of MA contractor Memoer information for direct man application Access to monthly local Chapter meetings for presentations and networking 			
 Significant discounts on Gas Venting Labels and Direct Venting Signs 			
New England Progress Magazine			
Discount on Code Books for resale			
Discount on Venting labels and Direct vent Signs			
Significant discounts on booths at Annual Trade Show			
 Significant discounts on advertisements placed in New England Progress Magazine 			
2023 PHCC Associate Membership Dues: \$950 per year			
Dues Payment Options: Check	Uvisa	MasterCard	Amex

Name on Card: ______Signature: _____

Credit Card #: _____ Exp. Date: _____ Sec.Code_____

Working Together for a Better Industry

400 Washington St., Suite 401, Braintree, MA 02184-4767 - 781-843-3800 - 800-542-PHCC - Fax: 781-843-1178 - www.phccma.org