



1202 Troy Schenectady Road, Latham, NY 12110 (518) 690-0766 info@crbra.com www.crbra.com

APPLICATION FOR MEMBERSHIP

Name: _____ Title: _____

Company Name: _____

Address: _____

County(ies) you do business in: Albany, Columbia, Greene, Montgomery, Rensselaer, Saratoga, Schenectady
(circle all that apply)

Phone: _____ Cell: _____ Fax: _____

E-Mail Address: _____ Website: _____

Membership Category: Please check only one

Associate Member (type of business: _____)

Remodeler

Builder

References: _____

Sponsor: _____

I agree to abide by the By-laws and Code Of Ethics of the Capital Region Builders and Remodelers Association, Inc., New York State Builders Association, and the National Association of Home Builders.

Signature of Applicant: _____ Date _____

A Check made payable to CRBRA or credit card charged in the amount of **\$510** (\$460 dues & \$50 one time application fee) representing my annual membership dues accompanies this application.

Credit Card #: _____ CVC #: _____ Exp: _____

Name as it appears on credit card: _____

Signed by: _____ Date: _____