



# 2023 APPLICATION NON-VOTING CONSULTANT, SPECIAL INSPECTION AGENCY ASSOCIATE MEMBERSHIP

I hereby make application for membership in the Firestop Contractors International Association, Inc., as a Non-Voting Consultant, Special Inspection Agency Associate Member. If elected to membership, I agree to accept and abide by all of the By-Laws now in force and as amended from time to time.

### Company information (exactly as it is to appear in the Membership List at FCIA.org)

Name of Company: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Phone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_  
Company E-mail: \_\_\_\_\_ www: \_\_\_\_\_  
Personal E-mail: \_\_\_\_\_ Cell: \_\_\_\_\_

### Complete this section only if applicable

Legal Name of Company (if different): \_\_\_\_\_  
Subsidiary or Division of (if applicable): \_\_\_\_\_  
Additional Business Entities \_\_\_\_\_

### Form of business organization (check one)

Sole Proprietorship  Partnership  Corporation  Other:

### Barrier Management Services (check all that apply) Additional \$600 USD to Appear In Specialized BMS Member Lists

Firestopping  Fire Dampers  Fire Doors (Rolling and Swinging)  Fire-rated Glazing  
 Barrier Management Software  Other

### Primary representative (only the name & Email is listed in the Member List)

Name: \_\_\_\_\_ Title: \_\_\_\_\_  
Individual's E-mail: \_\_\_\_\_  
Address (if different than company): \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Phone (if different) : \_\_\_\_\_ Fax (if different): \_\_\_\_\_



**FCIA MEMBERSHIP APPLICATION – NON-VOTING CONSULTANT,  
SPECIAL INSPECTION AGENCY ASSOCIATE MEMBERSHIP**

**CREDIT CARD FORM**

**Payment of Dues – New Member Dues: \$525 USD \$440 USD Renewals due annually in January**

**Barrier Management Services Listing: add \$600 USD Renewals due annually in January**

Card Number : \_\_\_\_\_ Expirations Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Cardholder's Name: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_-\_\_\_\_\_

Cardholder's Mailing Address: \_\_\_\_\_

Cardholder's Signature: \_\_\_\_\_ CVV \_\_\_\_\_

E-Mail \_\_\_\_\_

**Mail completed and signed Application with check or credit card info to:**

- **FCIA – 800 Roosevelt Rd, C-312 Glen Ellyn, 60137**
- **Or Email to [cathy@fcia.org](mailto:cathy@fcia.org)**

**QUESTIONS? Call +1 (708) 202-1108**

**We care about your privacy!**

**Upon complete processing of your credit card, this sheet will be shredded.**

**Membership Includes: FCIA Website Membership Listing, FCIA Members Only Access on Website, Firestop Industry Conference & Trade Show, FCIA Education and Committee Action Conference, FCIA Education DVD, Life Safety Digest Subscription, FCIA E-newsletter Subscription, FCIA Firestopping & Compartmentation Code and Specification Promotion, Committee Membership, use of FCIA's Trade Show Booth, and promotion of the Specialty Firestop Contractor Concept throughout the world.** In the event this application is accepted, as partial consideration for my membership, I give Firestop Contractors International Association, its assigns, licensees, successors in interest, and legal representatives, the irrevocable right to use any photographs and/or video of me taken at any FCIA events in all forms and in all media and in any manner for advertising, trade, promotion, exhibition, or any other lawful purposes, and I waive any right to inspect or approve the materials incorporating my likeness, including written copy that may be created and appear in connection with such photos and/or video.