

2025 APPLICATION VOTING INTERNATIONAL CONTRACTOR MEMBERSHIP

I hereby make application for membership in the Firestop Contractors International Association, Inc., as a Voting Contractor 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. In making application for membership, I hereby waive all claims against the Association, its officers, directors and all members arising out of any act in connection with the acceptance or rejection of this application, or any action taken by the Membership Committee of the Association.

Company information (exactly as it is to appear in the Membership List at www.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 □ C	Other:	
Types of work for which you contract (check all that apply)		
□ Penetration Firestopping □ Perimeter Firestopping □ Joint F	irestopping 🛛 Grease Duct Fire Protection	
Electrical Circuit Protection		
□ Caulking and Masonry Restoration □ Drywall □ Masonry □	Other	
Barrier Management Services (check all that apply) Additiona	al \$195 LISD to Appear in Specialized RMS Member Lists	
	•• •	
 □ All Barrier Management Services □ Firestopping □ Fire Dampers □ Fire Doors (Rolling and Swinging) □ Fire-rated Glazing □ SFRM and IFRM Fireproofing □ Barrier Repairs □ Barrier Surveys 		
□ Barrier Management Software □ Other		
Primary representative (only the name & Email is listed in the	Member List)	
Name: Tit	· · · · · · · · · · · · · · · · · · ·	
Individual's E-mail:		
A diduction (16 difference to the second sec		
	State: Zip:	
Phone (if different) :	Fax (if different):	

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Other representatives (only the names are listed i	in the Member List)
Name:	Title:
E-mail: Fax (if different):	
	Title:
	Fax (if different):
	IA 🛛 SWRI 🗅 Other:
	l you about us, if any)
	Name:
I hereby agree in entirety and without reservation to the all information in this Application is true, complete and o	he first paragraph of this membership Application. Further, I hereby certify th I correct to the best of my knowledge.
Signature of Officer, Partner or Owner:	
Print Name:	Title: Date:
Provide a brief paragraph, describing your fi	firm's business. Will be used on the FCIA website (<u>www.FCIA.org</u>)
General Market Area servedlimit 5 states/province	
General States / Provinces	
States / Provinces National – In Native Country	□ International – Regions
General States / Provinces	□ International – Regions
States / Provinces National – In Native Country	□ International – Regions
 States / Provinces National – In Native Country Application Requirements for Membership Approva Applicants must submit ONE of the following for re A. A minimum of two professional references relating 	□ International – Regions val val veview and approval: ng to the Firestopping Industry i.e.: General Contractors, Building Owners, Fi
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 States / Provinces	□ International – Regions val val review and approval: ng to the Firestopping Industry i.e.: General Contractors, Building Owners, Fire act: Phone: act: Phone: act: Phone: I or UL DRI Exam with an 80% or better.
 States / Provinces	International – Regions val review and approval: ng to the Firestopping Industry i.e.: General Contractors, Building Owners, Finators act: Phone: act: Phone: for office use or act: Phone: or UL DRI Exam with an 80% or better. (Attach copy of letter from UL/FM)
 States / Provinces	International – Regions val review and approval: ng to the Firestopping Industry i.e.: General Contractors, Building Owners, Finators act: Phone: act: Phone: for office use or act: Phone: or UL DRI Exam with an 80% or better. (Attach copy of letter from UL/FM)

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How did you hear about FCIA? (Check all that apply)		
FCIA Member Please Name Company/Contact	 Internet Search Life Safety Digest 	
□ FCIA Office (Phone call/email/postcard/fax)	□ Manufacturer	
Distributor	□ Other: Please name	
□ FM		
FCIA Committee Interest: (Check all that apply)		
□ Accreditation □ Codes □ Standards □ Technical □ Marketing □ Education □ Membership □ Program		
**Please fill out an application at: <u>WWW.FCIA.ORG</u> , click on committees, application.		
Payment of Dues – New Member Dues: \$1510 USD Renewals due annually in January		
Barrier Management Services Listing: add \$195 USD Renewals due annually in January		
Card Number:	Expiration Date:/	
Cardholder's Name:	Phone: ()	
Cardholder's Mailing Address:		
Cardholder's Signature:		
E-Mail	CVV#	

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

- FCIA 800 Roosevelt Rd, C-312 Glen Ellyn, IL 60137
- Or scan/email all sides of application to: lissettek@cmservices.com

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, Discounts on FCIA Manual of Practice, Firestop Industry Conference & Trade Show, FCIA Education and Committee Action Conference, FCIA Education DVD, Life Safety Digest Subscription, FCIA Enewsletter Subscription, FM and UL DRI Testing, FCIA Firestopping & Compartmentation Code and Specification Promotion, Committee Membership, use of FCIA's Trade Show Booth, FCIA office resources, 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.

FCIA International Contractor Membership Application Effective 1/2024