



2026 APPLICATION VOTING 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 ☐ Other: _____

Types of work for which you contract (check all that apply)

☐ Penetration Firestopping ☐ Perimeter Firestopping ☐ Joint Firestopping ☐ Grease Duct Fire Protection
☐ Electrical Circuit Protection ☐ Pipe Covering Insulation ☐ Curtain Wall Insulation ☐ Waterproofing
☐ Caulking and Masonry Restoration ☐ Drywall ☐ Masonry ☐ Other

Passive Fire Protection Barrier Management (check all that apply) Additional \$195 USD to Appear In Specialized PFP 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: _____ Title: _____
Individual's E-mail: _____
Address (if different than company): _____
City: _____ State: _____ Zip: _____
Phone (if different) : _____ Fax (if different): _____

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Other representatives (only the names are listed in the Member List)

Name: _____ Title: _____

E-mail: _____ Fax (if different): _____

Name: _____ Title: _____

E-mail: _____ Fax (if different): _____

Other Industry Memberships: ☐ ICAA ☐ NIA ☐ SWRI ☐ Other: _____

Recommending Member (FCIA member who told you about us, if any)

Company: _____ Name: _____

PLEASE READ: IF INVOICES SHOULD GO TO A DIFFERENT DEPARTMENT PLEASE PROVIDE THE INFORMATION BELOW

Accounting Information:

Email: _____

Phone Number: _____

I hereby agree in entirety and without reservation to the first paragraph of this membership Application. Further, I hereby certify that all information in this Application is true, complete and correct to the best of my knowledge.

Signature of Officer, Partner or Owner:

Print Name: _____ Title: _____ Date: _____

Provide a brief paragraph, describing your firm's business. Will be used on the FCIA website (www.FCIA.org)

General Market Area served...limit 5 states/provinces. National or International.

☐ States / Provinces - _____

☐ National – In Native Country _____ ☐ International – Regions _____

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Application Requirements for Membership Approval

Applicants must submit ONE of the following for review and approval:

A. A **minimum** of two professional references relating to the Firestopping Industry i.e.: General Contractors, Building Owners, Fire Marshals, Building Officials, other Firestop Contractors

For office use only

1. Company: _____ Contact: _____ Phone: _____
2. Company: _____ Contact: _____ Phone: _____
3. Company: _____ Contact: _____ Phone: _____

B. Employ personnel who have passed the FM 4991 or UL DRI Exam with an 80% or better.

Employee Name: _____ (Attach copy of letter from UL/FM)

C. Firm is FM 4991 Approved or UL/ULC Qualified Contractor.

☐ Yes (Attach copy of certificate)

D. Show Firm's Evidence of firestopping industry participation, contracting, for one year. (Attach record of evidence)

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

☐ FCIA Website

☐ UL

☐ 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: WWW.FCIA.ORG, click on committees, application.

Payment of Dues – New Member Dues: \$1,510 USD Renewals due annually in January

Passive Fire Protection Barrier Management 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

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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 BUNDLED Contractor Membership Application

Effective 1/2026