



**2019 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 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: \_\_\_\_\_

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

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

- FCIA - 4415 W. Harrison St., Suite 540 - Hillside, IL 60162
- Or fax both sides of application with credit card payment to +1 (708) 449-0837
- 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, 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 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.