

Phone: 619-219-9812 PO Box 2112 El Cajon, CA 92021

Email: APLCofSD@gmail.com

APPLICATION FOR MEMBERSHIP

The undersigned hereby applies for membership in the ASSOCIATED PLASTERING AND LATHING CONTRACTORS, and as evidence of good faith, encloses the sum of \$500.00 for the first year's dues. The undersigned states and agrees:

- 1. That if admitted to membership, the undersigned will abide and be bound by all the provisions of the Constitution and Bylaws of the ASSOCIATED PLASTERING AND LATHING CONTRACTORS as they now exist and as they may be amended from time to time.
- 2. That being signatory to any union's agreement is *not* a prerequisite for membership.

Applicant's Company	Name:			
Applicant Name:				
Mailing Address:	Street	City	State	Zip
E-mail:				_
Telephone:	Cell Phone	e:	Fax:	
Sponsored By:		with		
	Name	with Company		
Signature of Appl. CONTRACTORS:		ated thisday of		20
The undersigned is a l	0.0	ed in the lathing and/or plands. Number:	•	•
		ated thisday of		20
Billing Information:	(Check here if same as ab	oove)		
Contact Name:				
Mailing Address:				
<u> </u>	Street	City	State	Zip
E mail:		Dhonos		