

APPLICATION FOR MEMBERSHIP

Name: _____

Telephone No.: _____

Informal Name: _____

Fax No.: _____

Company Name: _____

E-Mail Address: _____

Address: _____

City, State, Zip: _____

Membership in the national RCI organization (see www.rci-online.org) is required to become an Ohio Valley Chapter Member.

Are you an RCI Member? Yes No RCI Membership No.: _____

CLASSIFICATION

Please indicate the classification of membership for which you are applying. All memberships are \$50.00/year

Professional Member – For those who derive their principal income as participating consultants, architects or engineers.

Industry Member – For those directly involved with manufacturing, distributing or contracting.

Quality Assurance Observer Member – For those directly involved with roof quality assurance.

Facility Manager – For those whose professional responsibilities are primarily the management, development or maintenance of public or private buildings.

Associate Member – For those who are not within the roofing industry (educators or government agencies).

Student Member – For full-time students enrolled in a construction-related curriculum.

I certify that I have read and understood the RCI Code of Ethics and hereby agree to abide by its principles. Any breach of these ethics may result in the forfeiture of my membership.

Signature: _____ Date: _____

Please make checks payable to OVCRCI or you can remit payment using your credit card:

Credit Card # _____ Exp Date: _____ Billing zip code: _____

We accept Visa, Mastercard, Discover and American Express.

Return Application and \$50.00 Payment to:

OVC-RCI 2077 Embury Park Rd. Dayton, OH 45414

Email: mmiller@assnsoffice.com