

MAKE YOUR COMMITMENT NOW TO BETTER OUR INDUSTRY!



Dear Future Member,

Your decision to join UCANE is an excellent one because you are helping to benefit our industry, helping us obtain more funding for clean water and wastewater projects and ultimately making your company more successful.

Please take the time now to complete this application and mail it back to the UCANE office. I look forward to receiving your completed application and your participation in our activities.

(Payment must accompany application)

UCANE Executive Director

MEMBERSHIP APPLICATION

Company Name: _____ Date: _____

Address: _____ State: _____ Zip: _____

Tel: _____ Fax: _____ E-Mail: _____

OFFICERS:

President: _____ Treasurer: _____

Vice President: _____ UCANE Rep: _____

MEMBERSHIP INFORMATION:

Referred By: _____

Company: _____

COMPANY PRODUCT LINES/SERVICES INCLUDE:

1. _____ 2. _____

3. _____ 4. _____

Do you currently advertise in trade magazines? Yes _____ No _____

UCANE committees you are eligible to serve on (Check if interested)

Government Relations _____ Safety _____ Insurance _____

Membership _____ Specifications _____ EEO/MBE _____

**UTILITY CONTRACTORS' ASSOCIATION
OF NEW ENGLAND, INC.**

ANNUAL MEMBERSHIP DUES
(Check Appropriate Category)

UCANE CONTRACTOR MEMBERSHIP:

ANNUAL VOLUME	ANNUAL DUES
\$ 0 - \$ 1M	\$1,000 _____
\$ 1M - \$ 3M	\$1,700 _____
\$ 3M - \$ 6M	\$2,750* _____
\$ 6M - \$10M	\$3,600* _____
\$10M - \$20M	\$4,600* _____
\$20M - or more	\$5,600* _____

UCANE ASSOCIATE MEMBERSHIP: \$ 750 _____

Signed _____ **Date:** _____

FOR ASSOCIATION USE ONLY:

Board Review: _____ **Date:** _____

Board Approval: _____ **Date Accepted:** _____

Please return application to:

Utility Contractors' Association of New England, Inc.
300 Congress Street • Quincy, MA 02169
Tel: (617) 471-9955 • Fax: (617) 471-8939
E-Mail: aklayman@ucane.com • Website: www.ucane.com