

Florida Window, Door and Millwork Council FWDMC

Company Name _____

Street Address _____

Mailing Address _____

City _____ ST _____ Zip Code _____ County _____

Phone: (_____) _____ Fax: (_____) _____

Key Contact _____ Title _____ e-mail: _____

Accounting Manager/Controller _____ e-mail: _____

Operations Manager _____ e-mail: _____

Sales Manager _____ e-mail: _____

Number of Full Time Employees _____

NO ADDITIONAL DUES FOR FBMA MEMBERS

For FBMA Members There Are No Additional Dues Required To Belong To The Florida Window, Door and Millwork Council.

For Non-FBMA Members, Florida Window, Door and Millwork Dues Are As Follows:

Window, Door or Millwork Retailer - Any firm or corporation engaged in the selling of retail products primarily to retail customers is eligible for this membership category.

Associate Member - Any person, firm or corporation that supplies materials and/or services directly to a FWDMC Retailer. An Associate Member will be eligible for all member services provided by FWDMC.

Company Type: (Please your Company Type and membership category below.)

FWDMC Retailer FWDMC Associate Member

FWDMC Retailer Single Operation		
Category	Sales Volume	Membership Investment
<input type="checkbox"/> F1	Less than \$5,000,000	\$ 550.00
<input type="checkbox"/> F2	\$5,000,001 - \$15,000,000	\$ 635.00
<input type="checkbox"/> F3	Over \$15,000,000	\$ 745.00
FWDMC Associate Single Operation		
<input type="checkbox"/> A1		\$ 640.00
Multiple Florida Locations - Retailer and Associate (Includes Headquarters & Branches)		
Category	Number of Branches	Membership Investment
<input type="checkbox"/> M1	1-2	\$ 855.00
<input type="checkbox"/> M2	3-4	\$1,155.00
<input type="checkbox"/> M3	5-15	\$1,545.00
<input type="checkbox"/> M4	16-25	\$2,450.00
<input type="checkbox"/> M5	26-50	\$4,880.00
<input type="checkbox"/> M6	51-100	\$9,730.00

Recommended by _____ Date _____ / _____

Please accept the following form of payment for the membership investment type above.

Check # _____ VISA MC AMEX Discover # _____

Expiration Date _____ / _____ Security Code _____ (3-digit code on back of VISA/MC, 4-digit code on front of AMEX)

Applicant's Signature _____

**Please make checks payable to FBMA and mail this form to PO BOX 65, Mount Dora, FL 32756-0065
or fax (352) 383-8756. Questions? Contact Bill Tucker at (352) 383-0366 or e-mail Bill@fbma.org.**

Payments to FBMA are not deductible as charitable contributions for Federal Tax Purposes. However, they may be deductible as an ordinary and necessary business expense.