

MISSION STATEMENT

The Connecticut Roofing Contractors Association [CRCA] strives to represent the highest levels of professionalism in the residential and commercial roofing industry by continually improving the technical and business related education of the contractors, the monitoring of state and federal legislation that impacts the roofing industry, facilitating the effective delivery of resources to our members, sharing resources with other roofing contractor association affiliates, and improving the general overall fellowship among roofing contractor members and their employees.



THE BENEFITS OF CRCA MEMBERSHIP

Your professional association provides...

- ◆ Industry Education
- ◆ Annual Table Top Trade Show
 - ◆ Legislative Advocacy
 - ◆ Leadership Opportunities
 - ◆ Industry Research
 - ◆ Annual Golf Tournament
 - ◆ Web Site
 - ◆ Networking
- ◆ Scholarship Opportunities

CRCA

Phone 860/243-3977

Fax : 860/286-0787

Email: info@crcainc.com

You are cordially invited to join the ...

Connecticut Roofing Contractors Association



**Your State
Roofing Organization
Representing the
Industry Since 1987**

A Leader in Industry Education

Previous CRCA Educational Program Topics Include:

- ◇ OSHA Regulations
- ◇ Building Codes
- ◇ Photovoltaic Systems
- ◇ Workforce Issues
- ◇ Workers Comp
- ◇ Roofing Safety
- ◇ Cost Control
- ◇ Green Roofing/Energy Efficiency
- ◇ Mechanics Leins
- ◇ Change Orders
- ◇ Steep Slope Fall Protection and Enforcement

APPLICATION FOR MEMBERSHIP

PLEASE CHECK ONE: Residential (\$325) Commercial/Industrial (\$650)
 Associate/Supplier (\$450) Affiliate/Professional Services (\$200)

FULL NAME: _____ DATE: _____

COMPANY: _____

ADDRESS/CITY/STATE/ZIP: _____

AREA CODE/PHONE: _____ AREA CODE/FAX: _____

E-MAIL: _____ WEBSITE _____

Check a volunteer opportunity in which you'd like to participate:

MEMBERSHIP PROGRAMMING GOLF OUTING

By providing my mailing address, e-mail address, telephone and fax number(s), I consent to receive communications sent by or on behalf of CRCA.

Optional Donation: I would like to make a \$_____ donation of voluntary support to the CRCA George Ordway Memorial Scholarship Fund. (suggested donation - \$100).

I hereby apply for membership in the Connecticut Roofing Contractors Association.

Check Enclosed: _____ (payable to CRCA) Total Payment: \$ _____

Credit Card payment: VISA MASTERCARD DISCOVER

Name on Card: _____ Signature: _____

Card Number: _____ Exp. _____

Please mail your completed application with your membership dues payment to:

*Connecticut Roofing Contractors Association (CRCA)
P.O. Box 30, Bloomfield, CT 06002*