**2024 Associate Membership Dues**

Amount: $300.00

New Membership ❒ Membership Renewal ❒

***Qualifications:***

*Any industry, company, architect, or engineer shall be eligible as an Associate Member.*

Contact Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Title:

Business Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mailing Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City: \_\_\_\_\_\_\_\_\_\_ State: \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Zip: \_\_\_\_\_\_\_\_\_

Phone: \_\_\_\_\_\_\_\_\_\_\_\_ Ext. \_\_\_\_\_\_\_ Fax: \_\_\_\_\_\_\_\_

Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Website: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Submit business emblem/icon to be posted on njsfppa.org

Fire Protection Contractor/Alarm Business Certification/License #: \_\_\_\_\_\_\_\_

Are you a member of ICC? ❒ Yes ❒ No

Applicant’s Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

***Association Office Use***

Voucher/PO #: Check #: Date Received:

Date Approved: Database Posted ❒ Revised 02/22/2024