



# Membership Application

www.sadv.org

Date: \_\_\_\_\_

Members: \_\_\_\_\_ Subcontractor \_\_\_\_\_ Supplier \_\_\_\_\_ Vendor \_\_\_\_\_ Manufacturer/Rep \_\_\_\_\_ Other \_\_\_\_\_  
Associate Members: \_\_\_\_\_ Engineer\* \_\_\_\_\_ Architects\* \_\_\_\_\_ Building Owner\* \_\_\_\_\_ Building Management\*  
\*without construction affiliate

Annually, what % of your gross revenue comes from comes from prime contractor /CM work directly to an owner? \_\_\_\_\_  
On an annual gross revenue basis, what % of your company's work is self-performed? \_\_\_\_\_ subcontracted out? \_\_\_\_\_

All Applications will be presented to the SADV Board meeting for review and approval.

## Contact Info

Company Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City, State & Zip \_\_\_\_\_  
Phone: \_\_\_\_\_ Fax \_\_\_\_\_  
Primary Trade: \_\_\_\_\_ Web: \_\_\_\_\_  
Specialty Listings for your company's website membership directory: \_\_\_\_\_

Primary Contact \_\_\_\_\_ Title \_\_\_\_\_  
Email \_\_\_\_\_ Phone \_\_\_\_\_

Add'l Name \_\_\_\_\_ Title \_\_\_\_\_  
Email \_\_\_\_\_ Phone \_\_\_\_\_

Please circle if applicable: WBE, MBE, DBE, or other \_\_\_\_\_

How did you hear about us: referred by \_\_\_\_\_ email \_\_\_\_\_ LinkedIn \_\_\_\_\_ networking event \_\_\_\_\_

## Brief Company Bio

## Get Involved

Committee participation: Development Team \_\_\_\_\_ BPI \_\_\_\_\_ BPI Team \_\_\_\_\_ Special Events \_\_\_\_\_  
Membership Spotlight: (2 @ each monthly meeting) interested yes \_\_\_\_\_ no \_\_\_\_\_

## Dues

Full-year Membership -- effective July 1<sup>st</sup> each year at \$975 \$ \_\_\_\_\_  
Pro-rated for New Members - please email [amy@sadv.org](mailto:amy@sadv.org) for amount owed.

Note: Membership includes SADV Membership Directory- company logo, direct links and specialty searches  
New members, please email your company logo in **JPEG format** to [amy@sadv.org](mailto:amy@sadv.org)

## Payment upon approval of Application

Credit Card: www.sadv.org "payment" tab at top right corner send membership application by email or postal mail.  
Check: Mail check payable to SADV, 400 Stenton Ave, Suite 215, Plymouth Meeting, PA 19462 along with Membership Application.