



**TEXAS LATHING &  
PLASTERING CONTRACTORS  
ASSOCIATION**

*Drywall • Plaster • Stucco*

*E.I.F.S. • Acoustical*

*Veneer Stone*

*Fireproofing*

**CONTRACTOR MEMBERSHIP APPLICATION**

The individual, partnership, company or corporation named below hereby applies for contractor membership in the Texas Lathing & Plastering Contractors Association (TLPCA).

The undersigned certifies that the firm is actively engaged in the walls and ceilings business and that, if accepted for membership, it will abide by the constitution and By-Laws of said Association.

It is agreed that permission to use Association insignia is granted as a privilege of Association membership. It is further agreed that all such insignia is the property of the Association and that the use of this property shall cease upon termination of Association membership.

Please fill out the enclosed TLPCA "Contractors Membership Application" and "Application Fact Sheet" and return them along with your check or credit card authorization in the amount of **\$995.00** to the Association Office. This sum will cover dues through December 31, 2019. Membership fees are not refundable.

<input type="checkbox"/> VISA	<input type="checkbox"/> MASTER CARD	<input type="checkbox"/> AMERICAN EXPRESS
Card # _____	Expiration Date _____	
Address of Cardholder _____		
Signature _____		

**Membership may be canceled by written notice to the TLPCA office.**

**Name of Firm:** \_\_\_\_\_

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

**Phone:** \_\_\_\_\_ **FAX** \_\_\_\_\_

**E-Mail Address:** \_\_\_\_\_ **Web Page:** \_\_\_\_\_

**Signatures (all firm officers)**

\_\_\_\_\_  
\_\_\_\_\_

Accepted: \_\_\_\_\_ Declined: \_\_\_\_\_ Date: \_\_\_\_\_

# TLPCA APPLICATION FACT SHEET

Name of firm applying for membership: \_\_\_\_\_

Type of business: \_\_\_\_\_

Please list the type of materials and/or products installed: \_\_\_\_\_

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Number of years in business: \_\_\_\_\_

Sole owner or partnership or corporation: \_\_\_\_\_

List at least two companies that you deal with that are in the walls and ceilings or related business:  
(Preferably TLPCA members) \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Present mailing address: \_\_\_\_\_

\_\_\_\_\_

Present business address: \_\_\_\_\_  
(If different from  
mailing address) \_\_\_\_\_

Phone: \_\_\_\_\_

Fax: \_\_\_\_\_

E-Mail: \_\_\_\_\_ Web Page: \_\_\_\_\_

List names of all officers: \_\_\_\_\_

Name	Title
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_____	_____
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_____	_____
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Referred to TLPCA by: \_\_\_\_\_

Name

Company

Return to TLPCA office with application and dues check.