



**TEXAS LATHING &  
PLASTERING CONTRACTORS  
ASSOCIATION**

*Plaster/Stucco/ E.I.F.S.  
Acoustical/Veneer Stone  
Fireproofing*

**CONTRACTOR MEMBERSHIP APPLICATION**

The individual, partnership, company, or corporation named below hereby applies for a 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 "Contractor 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. Membership fees are not refundable.

|                               |                                      |   |
|-------------------------------|--------------------------------------|---|
| <input type="checkbox"/> VISA | <input type="checkbox"/> MASTER CARD | <input type="checkbox"/> AMERICAN EXPRESS |
| Card # _____                  | Expiration Date _____                |   |
| CCV _____                     | Billing Zip Code _____               |   |
| Signature _____               |                                      |   |

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

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

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

Contact Name: \_\_\_\_\_ Contact Phone: \_\_\_\_\_

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

Signatures (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: \_\_\_\_\_

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: \_\_\_\_\_

Web Page \_\_\_\_\_

E-Mail: \_\_\_\_\_

List names of all officers:

| Name | Title |
|------|-------|
|------|-------|

|       |       |
|-------|-------|
| _____ | _____ |
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| _____ | _____ |
|-------|-------|

Referred to TLPCA by:

\_\_\_\_\_

\_\_\_\_\_

Return to TLPCA office with application and dues.