



Associated Builders and Contractors
of Southeast Texas
P.O. Box 1566 • 2700 N. Twin City Highway Nederland, TX 77627

Office: 409-724-7886 • Fax: 409-724-2519 • www.abcsetx.org

Company: _____

Mailing Address: _____

Street Address: _____

City/State/Zip: _____

Office Phone: _____

Office Fax: _____

Company Website: _____

Products and Services (for listing in ABC Membership Directory):

Geographic Area Covered: _____

Each member shall appoint and certify to the Membership Director of ABCSETX a person to be its main contact who shall represent, vote and act for and on behalf of the member in all affairs of the corporation; each member is entitled to a single vote.

Company Representative (ABCSETX Voting Member)

Title: _____

Phone: _____

Email: _____

Secondary Contact:

Phone: _____

Email: _____

Are you a member of another ABC Chapter?

Yes or No

If YES, please list your home Chapter:

Membership investments for Contractors and Suppliers is based on annual volume of business during the preceding year. Please check the appropriate category number below.

- 14 \$250,000,000 and over **\$9,700***
- 13 \$100,000,000-250,000,000 **\$8,200***
- 12 \$50,000,000-100,000,000 **\$7,200***
- 11 \$20,000,000-50,000,000 **\$6,700***
- 10 \$10,000,000-20,000,000 **\$5,600***
- 9 \$6,000,000-10,000,000 **\$5,300***
- 8 \$3,000,000-6,000,000 **\$3,300***
- 7 \$1,000,000-3,000,000 **\$2,700***
- 6 \$500,000-1,000,000 **\$2,200***

(NO CATEGORY 5)

- 4 Under \$500,000..... **\$1,100***

Supplier: Any person, firm or corporation engaged in any work related to the construction industry who **FURNISHES MATERIAL, BUT NOT LABOR**, to the construction site.

- 2 **\$900***

Associate: Any person, firm or corporation engaged in any work related to the construction industry) who **DOES NOT FURNISH LABOR/OR MATERIAL** to the construction site.

- 1..... **\$800***

***\$100 of your membership goes to the Free Enterprise Alliance**

I hereby apply for membership in Associated Builders and Contractors of Southeast Texas. The information I have provided above is complete and accurate to the best of my knowledge. Investments are for the membership in the local, state, and national ABC. I have enclosed the appropriate amount according to the category indicated above. Please charge my membership investment to my company credit card.

Signature _____

Print Name _____

Date _____