Membership Application

# Rocky Mountain Minority Contractors Association (RMMCA)

## Join the RMMCA and Expand your Reach

### Your Company

Company Name: _____
Mailing Address: _____
_____
City, State, Zip: _____
County: _____
Company E-mail Address:
_____
Web Site: _____
Main Phone Number: _____
Fax Number: _____
Billing Contact Information (if different from above):
_____
_____
# of Employees: _____
CCA Member: □ Yes □ No
Currently engaged in Horizontal Work:
□ Yes □ No
Bidding on CDOT Work:
□ Yes □ No
Preferred way to receive information:
___ Mail ___Fax ___Email

**Trade Category:** _____

### Primary Contact

Name: _____
Title: _____
Email Address: _____

### Desired Membership Level

□ Premier ($5,000)
□ Gold ($3,000)
□ Silver ($2,000)
□ Bronze ($1,000)
□ General ($100)

### Payment Methods:

_Check #: _____
_Cash (Receipt #)_____

(RMMCA Info only)
Date Payment Received: __/__/____
Method of Payment: __Check __Cash
Date Membership Activated: __/__/____

### Company Profile Information

(Please provide a brief description of your company's capabilities)

_____
_____
_____
_____
_____
_____
_____
_____

### Reason for Joining RMMCA:

What is the primary reason you joined RMMCA (How can we help meet your needs):

_____
_____
_____

**Thank you for Partnering with RMMCA to invest in expanding Business opportunities in the horizontal construction sector**

**Contact @ 303-991-4673**

**Fax Application to: 303-991-4677**

**Mail Application to: P.O. Box 201433 Denver, CO. 80220**