Chicago Roofing Contractors Association
1 Mid America Plaza, Floor 3, Suite 3014, Oakbrook Terrace, IL 60181
Phone: 708-449-3340 Email: info@crca.org – www.CRCA.org

2027 APPLICATION - CONTRACTOR MEMBERSHIP

REQUIREMENTS OF CONTRACTOR MEMBERSHIP *(Must Be Submitted Along with Application)*:

1. **Proof of liability insurance ($500,000 min.) & Copy of Workers' Comp Insurance Certificate**
2. **Proof of IL Roofing Contractor License Certificate (copy of IL license)**
3. **Proof of Safety Program (statement on your firm's letterhead that your firm has a Safety Program in place.)**

COMPANY INFORMATION (Enter name exactly as it is to appear on website, in directory, etc.):

Name of Company: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone Number: _____

Company Email: _____ Web: _____

Billing Email: _____

PRIMARY REPRESENTATIVE (Information for this membership's primary contact):

Name: _____ Title: _____

Individual Email (if different than company): _____

Address (if different than company): _____

City: _____ State: _____ Zip: _____

Phone (if different): _____

MEMBERSHIP LISTING (Which address should be printed in the CRCA directory and website?):

❑ Company Address ❑ Primary Representative Address

BUSINESS INFORMATION:

IL Roofing Contractor License Number: _____ License Type: ❑Limited ❑ Unlimited

Name on IL License: _____ First Effective IL License Date: ____/____/____

Year Business Established: _____ Union: ❑ Yes ❑ No If Yes, Union Affiliations: _____

Approx. Percentage of Company Sales: Roofing: _____% Waterproofing: _____% Sheet Metal: _____%

Other (describe): _____ How did you hear about CRCA?: _____

Legal Name of Company (if different): _____

Subsidiary or Division of (if applicable): _____

TYPES OF WORK FOR WHICH YOU CONTRACT (Check all that apply):

❑Low Slope Commercial/Indust/Institutional ❑Low Slope Single Family Resident. ❑Low Slope Multi Family Resident.

❑Steep Slope Commercial/Indust/Institutional ❑Steep Slope Single Family Resident. ❑Steep Slope Multi Family Resident.

❑Waterproofing/Dampproofing ❑Vegetative ❑Vacuuming ❑Air Barriers ❑Solar & Wind Energy

❑Metal Roofing ❑Architectural Sheet Metal

ADDITIONAL CONTACTS (To receive CRCA communications on events, etc.):

Name: _____ **Email:** _____

Name: _____ **Email:** _____

Name: _____ **Email:** _____

Name: _____ **Email:** _____

BE SURE TO COMPLETE ALL INFORMATION AND SIGN THE SECOND PAGE OF THIS APPLICATION!

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BUSINESS REFERENCES (List three manufacturers, suppliers, or distributors with whom you do business & list other association memberships with the top one being the CRCA member who referred you!):

Company: _____ **Contact:** _____ **Phone:** _____

Company: _____ **Contact:** _____ **Phone:** _____

Company: _____ **Contact:** _____ **Phone:** _____

MEMBERSHIP LEVEL OPTIONS (SELECT ONE):

❑ **CRCA Basic Membership - $875**

JUMP TO UPGRADED LEVEL (DETAILS FOR EACH AVAILABLE AT www.CRCA.org/Upgraded-Members/Upgrade-Your-Membership)! ALL LEVELS INCLUDE THE CRCA BASIC MEMBERSHIP.

❑ **BRONZE - $1,500**
❑ **SILVER - $2,500**
❑ **GOLD - $3,500**
❑ **PLATINUM - $5,000**
❑ **DIAMOND - $10,000**

DUES PAYMENT & AGREEMENT:

COMPANY WILL BE INVOICED UPON APPROVAL OF MEMBERSHIP

This Applicant is applying for Contractor Membership in the Chicago Roofing Contractors' Association, Inc. as a corporate membership. If elected to membership, this business entity agrees to accept and abide by all of the By-Laws now in force and as amended from time to time. In making application for membership, all claims will be waived against the Association, its officers, directors, and all members arising out of any act in connection with the acceptance or rejection of this application, or any action taken by the Arbitration Committee of the Association.

I hereby agree in entirety and without reservation to the above paragraph of this membership Application. Further, I hereby certify that all information in this Application is true, complete, and correct to the best of my knowledge.

Signature of Officer, Partner or Owner: _____

Print Name: _____ Title: _____ Date: _____

PROVIDE A COMPANY PROFILE/DESCRIPTION TO BE USED ON THE CRCA WEBSITE:

SEND COMPLETE APPLICATION (INCLUDING REQUIRED SUPPORTING MATERIALS) VIA:

MAIL: Chicago Roofing Contractors Association
1 Mid America Plaza, Floor 3, Suite 3014
Oakbrook Terrace, IL 60181
EMAIL: info@crca.org