



P.O. Box 22597, Honolulu, HI 96823-2597
808-479-6825
pdcaofhawaii@gmail.com

**ASSOCIATE
MEMBERSHIP APPLICATION**

Name of Firm: _____

Address: _____

Phone: _____

Fax: _____

Email: _____

Principal Representative: _____

Title: _____

Alternate Representative: _____

Title: _____

Products or Lines Represented: _____

Date: _____

Signature: _____

Title: _____

Associate Member initiation fee is \$250.00 and dues are \$500.00 per calendar year, payable in advance. Associate Members shall be manufacturers, wholesalers, distributors, and/or dealers in equipment, services or materials of all kinds used in connection with or incidental to the conduct of the coating application industry. Associate Members may be appointed members of any committee, attend membership meetings, have the privilege of the floor, and enjoy such other rights and privileges as may be provided in the By-Laws or as determined from time to time by the Board. No Associate Member shall have a voting position or hold any elective office.

Please fill out this form and mail back to this office with a check payable to PDCA of Hawaii.

Membership is subject to approval by the PDCA of Hawaii Board of Directors.