



Attached please find an application for Associate Membership with the Mechanical Contractors Association of Omaha.

Our Associates tend to be suppliers, factory reps, student chapter members, local utility companies, insurance companies, and attorneys who practice construction law. We currently have 38 Associate Member Companies.

The requirements for Associate Membership are minimal. The applicant must demonstrate some tie to the mechanical industry and pay annual dues in the amount of \$675 for up to 2 people. On occasion, MCA-Omaha will ask for special help, such as donating supplies for our community service projects and assisting in educational seminars.

As an Associate Member of MCA-Omaha you are invited to participate in our monthly meetings and social events, except in very rare cases where meetings are limited to contractor members. Each Associate can send two people free of charge to monthly breakfast and/or dinner meetings. If you bring additional attendees, Association policy requires that your company be billed for the cost of the meals. On many occasions, this has been waived in order to encourage as many of your employees as possible to become familiar with the Association and its Members.

Associate Members do not serve on the MCA-Omaha Board of Directors, vote on policy, vote in officer elections, or otherwise participate in the governance of the Association. However, your input and expertise is always welcome as we prepare monthly member meeting topics and educational programs.

Please mail your completed application form, contact sheet, and a check for \$675 to:
Mechanical Contractors Association of Omaha
7561 Main Street, Suite 408
Omaha, NE 68127

Sincerely,

Kelsey Johnson

Kelsey Johnson
Mechanical Contractors Association of Omaha
Executive Vice President
kjohnson@mca-omaha.org
402.592.3330



Mechanical Contractors Association of Omaha, Inc.
Application for Associate Membership

Date _____

The undersigned hereby applies for Associate Membership in the Mechanical Contractors Association of Omaha, Inc., hereinafter called the Association, and hereby promises and agrees, if accepted as an Associate Member, to be bound by all the provisions of the Articles of Incorporation and the By-laws of the Association, as they may be amended from time to time.

It is further acknowledged that the undersigned has received, read, and understood a copy of the Articles of Incorporation and the By-Laws of the Association.

In accordance with the By-Laws of the Association, as amended, and the accepted policies and standards by which the Association acts, the undersigned deposits \$675.00 for up to 2 people in payment of Associate Membership dues which is the annual contribution required by the Association of its Associate Members. It is further understood that the deposit will be returned if the Association rejects the application for Associate Membership by the undersigned.

Company Name

Name of Applicant (please print)

By _____
Signature of Applicant

_____ Date

MCA-Omaha Associate Member Contact Information

Contact Information for Internal MCA-Omaha Purposes:

Company Name: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Physical Address (if different): _____

General Office Phone: _____ General Office Fax: _____

Primary Contact Person: _____

Cell: _____

Email: _____

Secondary Contact: _____

Cell: _____

Email: _____

Accounts Payable Email: _____

Website Information – Associate Membership Directory Link

Please fill out the following information specifically for the website.

Company Name (How you'd like it listed): _____

Company Contact Name: _____

Contact E-mail (if you want to list one): _____

Company Website: _____

Please send your company logo to abrown@mca-omaha.org.



MCA-Omaha
7561 Main Street, Suite 408
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