



Home Builders Association of Western Maryland
16 Greene Street, Cumberland, MD 21502

Telephone: 301-722-4343 * Fax: 301-722-3842

E-mail: hbuilder@atlanticbbn.net * Web: www.hbawmd.org

APPLICATION FOR MEMBERSHIP

NAME/TITLE: _____

COMPANY NAME: _____ PHONE: _____

LICENSE OR REGISTRATION # _____ FAX: _____

E-MAIL / WEB ADDRESS: _____ / _____

BUSINESS ADDRESS: _____

MAILING ADDRESS: _____

BANK / CREDIT REFERENCE(S): _____

I agree to abide by the Constitution and By-Laws of the Local association to which this membership application is directed, of the National Association of Home Builders of the United States with which it is affiliated, and of the affiliated State Association if such affiliation exists. A remittance of \$325.00 representing my annual membership dues in the affiliated Association accompanies this application.

By signing I understand I am giving the Home Builders Association of Western Maryland permission to check all references.

Signature of Applicant: _____

Sponsored By: _____

*Due payments to your local builders' association are **NOT** deductible as charitable contributions for federal tax purposes. However, due payments may be deductible by members as an ordinary and necessary business expense.*