



8433 Enterprise Cir, Ste. 120  
Lakewood Ranch, FL 34202  
PHONE: (941) 907-7745  
FAX: (941) 907-3898

EMAIL: info@gcbx.org  
www.gcbx.org

# Membership Application

**The undersigned hereby:**

- a. applies for membership in Gulf Coast Builders Exchange, Inc.
- b. agrees to pay the prescribed annual dues and submit payment therefore;
- c. agrees to abide by the Bylaws and subscribes to the Code of Ethics;
- d. agrees that by providing fax or email information to accept such communications from GCBX, Inc. or GCBX Political Committee.

How did you hear about GCBX? \_\_\_\_\_

If a GCBX Member referred/sponsored you, who may we thank? \_\_\_\_\_

Principal Contact Person \_\_\_\_\_ Title \_\_\_\_\_

E-Mail Address \_\_\_\_\_ Website \_\_\_\_\_

Name of Firm \_\_\_\_\_ Type of Business \_\_\_\_\_

Street Address \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Total # of local employees \_\_\_\_\_

**As the business is the member, you can add additional employee contacts to receive our weekly emails (list name and email)**

\_\_\_\_\_ Total Annual Payroll Amount \_\_\_\_\_

\_\_\_\_\_

F.E.I.N. \_\_\_\_\_

Trade License Number \_\_\_\_\_  County  State  City

*(contractors required to be licensed must include license number -- if pending approval, write "pending")*

**PAYMENT IN THE AMOUNT OF \$625.00 (TOTAL) SHOULD ACCOMPANY THIS APPLICATION.  
(THIS \$625.00 INCLUDES THE VOLUNTARY \$75 POLITICAL COMMITTEE CONTRIBUTION.)**

**PLEASE MAKE YOUR CHECK PAYABLE TO: GULF COAST BUILDERS EXCHANGE, INC.**

Payments, contributions, or gifts to **Gulf Coast Builders Exchange, Inc.** are not deductible as charitable contributions or Federal income tax purposes. However, dues payments may be deductible as an ordinary and necessary business expense. Initial dues entitle a company representative to a free networking social at a **GCBX** event during the first 12 months of membership.

Signature \_\_\_\_\_ Date \_\_\_\_\_

**\$625.00 Payment:**  Check Attached \_\_\_\_\_

**Credit Card Information:**  VISA  MC

Name on Card \_\_\_\_\_ Card Number \_\_\_\_\_

Billing Address \_\_\_\_\_

Exp. Date \_\_\_\_\_ CVC Code (3Digits on Back) \_\_\_\_\_ Signature \_\_\_\_\_

**Keystone Payment:**  Platinum  Gold  Silver  Bronze **Total Amount: \$** \_\_\_\_\_

**Voluntary Contribution:** GCBX Construction Education Programs Fund \_\_\_\_\_