

PLEASE PRINT MEMBERSHIP APPLICATION

MEMBERSHIP TYPE:	BUILDER MEMBER or ASSOCIATE MEMBER
Builder members MI	JST provide their Louisiana Contractor's License number.
La. Residential #:	La. Commercial #:
Home Improvement registratio	n #: Other:
Company Name:	
Representative Name (member	of record):
Mailing address:	
City:	State: ZIP
Phone:	Cell:
Email:	Website:
Description of Operation (see a	ttached list):
HBA OF SOUTHWEST LOUISIAN	IA DUES:
Develop	per/Builder: \$472.00 Associate: \$472.00
federal tax purposes. \$41.02 is no * Membership dues include a vo	an "ordinary & necessary" expense, not as charitable contributions for of deductible as it relates to lobbying expenses. Dluntary contribution of \$20.00 to the Local & State Political Action of wish to contribute to the PACs, you may deduct this voluntary nent, for a total of \$452.00.
•	tion and By-laws of the HBA of Southwest Louisiana, of the National f the United States with which it is affiliated, and of the affiliated tion.
Company Rep. Signature:	Application Date:
	Sponsor's Signature:
• •	n dues payment by email, fax, or mail. We accept all major credit cards rd, please let us know and we will email you an invoice payable online n.

HBA SWLA email: director@hbaswla.org