



1518 K Street NW Washington, DC 20005  
Tel: (202) 737-7775  
Fax: (202) 638-4833  
Email: info@commissioning.org  
Website: www.commissioning.org

## Application for Associate Membership

A separate application is required for each individual applying for associate membership.

### Applicant Information

First Name \_\_\_\_\_ MI \_\_\_\_\_ Last Name \_\_\_\_\_

Title \_\_\_\_\_

Company Name \_\_\_\_\_

Address \_\_\_\_\_

Telephone \_\_\_\_\_ Fax \_\_\_\_\_ Email \_\_\_\_\_

Primary Trade or Profession (i.e. electrical, HVAC, owner, architect, etc.) \_\_\_\_\_

List current licenses, registrations and/or certifications held by applicant: \_\_\_\_\_

**If accepted for associate membership I hereby agree to abide by the ACG bylaws, policies and procedures. I understand that:**

- 1. Associate member status is available to individuals who are not actively engaged in providing services as a commissioner authority.
- 2. Associate members are strictly prohibited from representing themselves as certified members of ACG, and may not use the ACG logo.

Application Submitted by \_\_\_\_\_

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

**Annual Dues:** Annual Membership dues for ACG associate members are \$250.

### PAYMENT INFORMATION

<input type="checkbox"/> Check Enclosed	<input type="checkbox"/> Visa	<input type="checkbox"/> Mastercard	<input type="checkbox"/> American Express
Card Number _____		Expiration Date _____	
Name of Cardholder _____			
Signature of Cardholder _____			



Submit application and all applicable fees to:  
**ACG • 1518 K Street, NW • Washington, DC • 20005**