**MEMBERSHIP RENEWAL APPLICATION (INTERIM)**

**Membership Information Sheet**

*(app version 4/2023)*

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

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

City/State/Zip: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mailing Address (if different from above): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City/State/Zip: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Telephone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Fax:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Website: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Executive Representative to RCA\*: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Job Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**OPTIONAL CONTACT INFORMATION**

Providing the following information will help RCA tailor its messages to the appropriate company contacts.

Alternate Primary Contact (additional executive-level member to receive RCA correspondence):

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Assistant to the Executive Representative(to be cc’ed on RCA member email correspondence)**:**

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Director of Marketing (or equivalent):

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Safety Program contact (to receive Safety Meeting Outline emails):

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

IT contact (to receive technology & related emails):

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\*Each member firm shall designate in writing on the membership agreement or renewal application an executive representative of the member who shall represent the member on all affairs of the Association. Other staff of a member firm may serve on committees or take part in discussions. The executive representative of Active members shall vote on behalf of the member and be eligible to hold office.

**MEMBERSHIP RENEWAL APPLICATION (INTERIM)**

**Membership Information Sheet (continued)**

**OPTIONAL CONTACT INFORMATION (continued)**

HR contact (to receive military service initiative apps & human resources/staffing-related emails):

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home Depot contact (to receive updates/correspondence about the Home Depot rebate):

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Operations Manager/Office Manager contact (to receive Next Gen, operational, and event emails):

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Project Manager contact(s) (to receive Next Gen, training, and other PM-related emails):

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Superintendent contact(s) (to receive Next Gen, training, and other superindent-related emails):

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**MY BUSINESS IS/HAS (Include a copy of documentation):**

\_\_\_\_Minority Owned Business (MBE) Certificate number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_Women Owned Business Enterprise (WBE) Certificate number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_LEED Accredited Professional

 Name of Certificant\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_Certified Development Design & Construction Professional

 Name of Certificant\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**OUR WORK IS (Check all that apply):**

\_\_\_\_Department Stores \_\_\_\_Retail Tenant Improvement \_\_\_\_Shopping Center

\_\_\_\_Retail Big Box \_\_\_\_Restaurants \_\_\_\_Hospitality

\_\_\_\_ Commercial Office \_\_\_\_ Commercial Warehouse \_\_\_\_Other Commercial

Annual Retail Construction Revenue: \_\_\_\_\_\_\_\_\_\_\_\_\_\_
Total Annual Revenue: \_\_\_\_\_\_\_\_\_\_\_\_\_\_
Number of Full Time Employees: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

**MEMBERSHIP RENEWAL APPLICATION (INTERIM)**

**MEMBERSHIP REQUIREMENTS**

In order to be eligible for membership into the Association, an individual, partnership, firm, or corporation must meet and maintain the following qualifications in the sole discretion of the Association’s Board of Directors:

1. A member must be engaged directly in Retail construction; as a general contractor that is a signatory on prime contracts.
2. A member must have been directly involved in retail construction for the last five years as a general contractor at the time of application for membership.
3. A member must be properly licensed and/or registered in the states and jurisdictions in which it works.
4. A member must be able to secure Performance and Material Payment Bonds for projects; bonding company must be AM Best rated A- or better.
5. A member must have a favorable Experience Modification Rating (EMR) (RCA reserves the right to request additional information when a reported EMR is over 1.0)
6. A member must carry General Liability and Workers Compensation coverage.
7. A member agrees to comply with and abide by the Association’s Bylaws.
8. A member must comply with the Association’s Code of Ethics as follows:
	1. A member shall retain full regard in the public interest in fulfilling his or her professional responsibilities.
	2. A member shall not engage in any deceptive practice, or in any practice that creates an unfair advantage for the member or another.
	3. A member shall not maliciously or recklessly injure or attempt to injure the professional reputation of others.
	4. A member shall ensure that when providing a service that includes advice, such advice shall be fair and unbiased.
	5. A member shall not divulge to any person, firm, or company, information of a confidential nature acquired during the course of professional activities.
	6. A member shall carry out his or her responsibilities in accordance with current professional practice.
	7. A member shall keep informed of new concepts and developments in the construction process appropriate to the type and level of his or her responsibilities.

Code of Ethics adopted with permission from the American Institute of Constructors; April 1999 Revision

All new member applications that meet the specified criteria will be presented to the Board of Directors by the Membership Committee of RCA. At a regularly scheduled Board Meeting, the Membership Committee will present the applicant’s complete application package to the Board, at which time, the Board will vote to accept or deny membership.

The applicant may meet all of the Membership Application qualifications, however, the Board of Directors reserves unto itself discretion to deny approval of the Membership Agreement Application, with or without cause.

By signing this Membership Application, the applicant represents that the above information is true and correct and that it currently meets and will continue to meet the Association’s qualifications for membership.

Executive Representative Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Printed Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**MEMBERSHIP RENEWAL APPLICATION (INTERIM)**

**APPLICATION CHECKLIST**

RCA members must submit full renewal packages every third year. In the interim two years, the affidavit on page 4 of this application, on company letterhead, dated, addressed to Retail Contractors Association, and signed by the Executive Representative, along with full membership dues, will be considered a membership renewal.

The RCA office will send renewal notices, along with instructions of what information is needed, by April 1 of each year, with a renewal deadline of May 31. Contact the RCA office at info@retailcontractors.org or 703-683-5637 with questions.

Please provide the following items with your application. **All information and materials should be submitted electronically**, preferably as a single PDF file, without any password protection.RCA may requestadditional information needed to make a membership decision.

* Completed Membership Information sheet
* Membership affidavit, signed by Executive Representative (same person listed on Membership Information sheet), on company letterhead
* Dues are $2,500.00 per year.

Please note: The applicant may meet all of the membership qualifications, however, the Board of Directors reserves unto itself discretion to deny approval of the Membership Agreement application, with or without cause.

**WE ARE INTERESTED IN LEARNING MORE ABOUT THE FOLLOWING COMMITTEE(S):**

\_\_\_\_ Sponsorship & Member Benefits

\_\_\_\_ Membership Recruitment & Retention

\_\_\_\_ Workforce Development

\_\_\_\_ Professional Development

\_\_\_\_ Construction Training

\_\_\_\_ Legislative/Regulatory

**MEMBERSHIP RENEWAL APPLICATION (INTERIM)**

**RCA MEMBERSHIP AFFIDAVIT**

Instructions: The following must be included as part of the membership application package, on company letterhead, dated, addressed to Retail Contractors Association, and signed by the Executive Representative:

Date

Retail Contractors Association

2800 Eisenhower Avenue

Suite 210

Alexandria, VA 22314

Dear Board of Directors:

We request renewal of our RCA membership. With this letter, I represent that the information provided is true and correct and that [COMPANY NAME] currently meets and will continue to meet the Association’s qualifications for membership, including:

[COMPANY NAME] is properly licensed and/or registered in every state in which projects are currently in progress;

[COMPANY NAME] is committed to being properly licensed and/or registered in every state in which they work, meaning licenses/registrations will be renewed and/or activated in each state as necessary;

[COMPANY NAME] will maintain current General Liability and Workers Compensation coverage;

[COMPANY NAME]’s three-year EMR history is \_\_\_\_\_;

[COMPANY NAME] will comply with and abide by the Association’s Bylaws; and

[COMPANY NAME] will comply with the Association’s Code of Ethics.

Sincerely,

Executive Representative

Title