



MEMBERSHIP APPLICATION

NOTE: To sign up and pay electronically please access this form at www.newenglandawi.org

Company: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ FAX: _____

Website: _____

Primary Contacts: _____

Email Addresses: _____

Cell Phones: _____

Products and/or Services provided by your company: _____

ASSOCIATE/SUPPLIERS MEMBERSHIP \$350.00 _____

MANUFACTURING MEMBERSHIP \$350.00 _____

Note: Manufacturing Members must be National Members of the Architectural Woodwork Institute.

AFFILIATE MEMBERSHIP \$50.00 _____

TOTAL PAID: _____

Signature & Title of Applicant: _____

Please remit dues payable to:

New England AWI
198 Tremont Street, Suite 405
Boston, MA 02116

PHONE (617)855-9024

FAX (617)444-8405

www.newenglandawi.org