

Member ID: _____

(For official use only)

Important notes:

Please complete all sections of this form and return to:
Drywall & Interior Systems Contractors Association
750 US Highway 202, Suite 200, Bridgewater, NJ 08807

If you require any assistance or advice when completing this form please call the office at (908) 359 1184 or email info@disca.org



CONTRACTOR MEMBERSHIP APPLICATION

DISCA Federal Tax ID: 22-1989461

The following firm hereby applies for Contractor Membership in the Drywall & Interior Systems Contractors Association, Inc. of New Jersey

Section A – Organization Details

(Please complete all fields. Organization's name should be entered as you wish it to appear on all DISCA official documents)

Organization Name: _____

Acronym: _____

Date of Application: _____

- Do Not Publish Info on DISCA eDirectory

PRIMARY BUSINESS ADDRESS

BILLING ADDRESS

Department: _____

- Same as Primary Business Address

Address Lines: _____

Address Lines: _____

City: _____

City: _____

State: _____ Zip: _____

State: _____ Zip: _____

Office Phone: _____

Office Fax: _____

Website: _____

Referred by: _____

Company Operated as

Corporation Partnership Sole Proprietor Other _____

Major Type of Work: _____

Other Categories of Contracting Performed:

- Acoustical & Specialty Ceilings
- Doors & Frames
- Drywall
- Exterior Insulation & Finish Systems
- Finish Carpentry
- Fireproofing
- Floor Covering
- Lathing
- Light Gauge Framing
- Millwork
- Painting & Wallcovering
- Plastering
- Precast Glass/Reinforced Gypsum
- Rough Carpentry
- Scaffolding Installation
- Taping & Spackling

Other (please specify) _____

Number of years in business under present name: _____

Previous names of business and years of operation:

Principals and Titles:

| | |
|-------|-------|
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |

Which of the above is designated official voting representative of company and individual responsible for compliance with conditions of membership?

Names of other companies employing carpenters and/or finishers in New Jersey which are owned, operated or affiliated with applicant company or its principals:

Names of related companies no longer in business:

Names of other construction industry associations you belong to:

Names and dates of last three drywall or acoustical ceiling jobs performed in New Jersey in the 12 months immediately prior to date of application for membership:

| Name of Job | Location | Type of Job | Date of Job | Job Subcontracted for: |
|-------------|----------|-------------|-------------|------------------------|
| _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ |

Section B – Primary Individual Member Details

(Please complete all fields. Primary's name should be entered as you wish it to appear on all DISCA official documents)

First Name: _____ Title: _____

Last Name: _____ Nick Name: _____

Address (If different from Organization):

City _____ State: _____ Zip: _____

Work Phone (If different from Organization): _____ Mobile: _____

Business E-mail Address: _____

Section C – Declarations

(Please complete all field).

DISCA is the exclusive bargaining agent on behalf of its Regular Members, who are interior systems contractors, with the following unions:

- UBC - Eastern Atlantic States Regional Council of Carpenters ; and
- I.U.P.A.T. District Council 711

Select each union you have or intend to have contract with. By selecting each union, you are assigning DISCA your bargaining rights:

- UBC - Eastern Atlantic States Regional Council of Carpenters
- I.U.P.A.T. District Council 711

Are you currently signatory to any other collective bargaining agreements?

- No
- Yes; please list all:

The undersigned does hereby represent that applicant firm is qualified for Contractor Membership in the Drywall and Interior Systems Contractors Association, Inc. of New Jersey according to the eligibility requirements as set forth as follows in the Association Constitution & By-Laws:

“Contractor members shall be persons or firms of good repute who employ union tradesmen; shall have been in business for not less than one (1) year, the majority of whose overall business in the one-year period immediately prior to application for membership has been conducted principally in the installation of interior or exterior wall, ceiling, or related systems (the “Industry”)”

And further agrees and consents to be governed and bound by the Constitution and By-Laws of the Association, and by all policies and decisions of the Board of Directors subject only to the limitations of the Constitution & By-Laws;

And does further agree and consent to be bound by and comply with the terms and conditions of the Collective Bargaining Agreements entered into by the Association with the United Brotherhood of Carpenters and the IUPAT District Council 711, copies of which will be provided after the acceptance of membership, and such other Collective Bargaining Agreements as shall be entered into with other labor unions;

“Each Contractor Member of the Association hereby appoints and designates the Association as its exclusive bargaining representative to negotiate, renegotiate, arbitrate, interpret, amend, modify, or terminate any and all collective bargaining agreements with labor organizations in the interior/exterior wall, ceiling, or related systems industry in the State of New Jersey and any other labor organizations with whom the Association engages in collective bargaining activities. Any such action taken by the Association shall be binding upon and inure to the benefit of each and every contractor member of the Association and each contractor member hereby agrees to comply with the action so taken unless the contractor member shall have terminated its membership in accordance with the provisions for resignation contained in Article III, Section 8 hereof.” (DISCA Constitution, Article X, Section 1)

Notice of Consent: *Application for membership in DISCA constitutes consent for the association to communicate with you via phone, fax, e-mail or mail.*

Signature (Official Voting Representative of Firm)

Date

Organization Name

Section D – Membership Fees

(Dues may be deducted as a business expense)

Annual Dues (payable by all new and reinstating members)
Association of the Wall and Ceiling Industry (AWCI) Membership
Signatory Wall and Ceiling Contractors Alliance (SWACCA) Membership

| |
|-----------------|
| \$500 |
| Included |
| Included |

Section E – Methods of Payment

(Enclosed with membership application, please remit dues payment)

- **Check payable to ‘Drywall & Interior Systems Contractors Association’**

Please return application and payment to: 750 US Highway 202, Suite 200, Bridgewater, NJ 08807

- **Credit/debit card. Please debit my account with the total cost of dues**

| | | | | |
|---|-------|--------|-------|------------|
| Credit Card Information | | | | |
| Card Type: _____ | | | | |
| Cardholder Name (as shown on card): _____ | | | | |
| Card Number: ____ - ____ - ____ - ____ | | | | |
| Expiration Date (mm/yy): ____ / ____ | | | | |
| Is this a corporate card? _____ | | | | |
| Cardholder's name and address if different from those at the beginning on this application | | | | |
| Full Name: _____ | | | | |
| Street Address: _____ | | | | |
| | | | | |
| City | _____ | State: | _____ | Zip: _____ |

I _____, authorize _____ to charge my credit card above _____ for dues payment.

Cardholder's signature

Date

Please fax the completed form if paying by credit/debit card to (908) 359 7619 or send with your check to DISCA, 750 US Highway 202, Suite 200, Bridgewater, NJ 08807. In the interests of data security we do not recommend you send credit or debit card details by email.

Payment Receipt

- Please check here if you would like the office to email you a payment receipt. Payment receipts are not issued unless you specifically request one.

Membership card and Welcome Package

Your membership card and welcome package will be email to the primary member once the membership has been approved by DISCA board of directors and payment has been processed.