



Builders Exchange Network Membership Application

SECTION A – Applicant/demographic information

Please type or print all information clearly

Applicant name:	Title:
Association/exchange name:	
Business street address:	
Street address 2:	
City:	State/province:
Zip/postal code:	Phone: () Fax: ()
Email:	Website: www.
Spouse/partner name: <i>(optional)</i>	

SECTION B – Association/exchange information

<input type="checkbox"/> Member owned	<input type="checkbox"/> Privately owned	Year founded:
<input type="checkbox"/> Own building	<input type="checkbox"/> Rent building	Number of annual meetings?
Total registered members:	Total paid staff:	Member-elected board of directors? <input type="checkbox"/> Yes <input type="checkbox"/> No
How long have you held your current position/title?		
Is managing this association/exchange your primary job/occupation?		
Employed full-time in this role? <input type="checkbox"/> Yes <input type="checkbox"/> No Are you an executive of any other association? <input type="checkbox"/> Yes <input type="checkbox"/> No		
If yes, please indicate the name of the association and its affiliation with your exchange:		
Name:	Affiliation:	
Represent all segments of industry? <input type="checkbox"/> Yes <input type="checkbox"/> No Local involvement with public agencies? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Number of membership categories?		Number of member categories with voting privileges?
What geographic area does your organization cover?		

SECTION C – Services, publications and programs

<input type="checkbox"/> Alternative dispute resolution	<input type="checkbox"/> Apprenticeship programs	<input type="checkbox"/> Association website
<input type="checkbox"/> Association directories	<input type="checkbox"/> Classified advertising	<input type="checkbox"/> Commissioner for oaths
<input type="checkbox"/> Construction archives	<input type="checkbox"/> Construction industry expo	<input type="checkbox"/> Industry library
<input type="checkbox"/> Contracts, guides and forms	<input type="checkbox"/> Construction reporting/news	<input type="checkbox"/> Construction tendering system
<input type="checkbox"/> Crime prevention programs	<input type="checkbox"/> Education programs	<input type="checkbox"/> Fax services
<input type="checkbox"/> Government liaison	<input type="checkbox"/> Group purchase programs:	<input type="checkbox"/> Online/virtual plan room
	<input type="checkbox"/> Mobile/wireless	<input type="checkbox"/> Physical plan room
	<input type="checkbox"/> Dental/medical	<input type="checkbox"/> Private projects online
	<input type="checkbox"/> Gasoline	
	<input type="checkbox"/> Insurance (other)	
	<input type="checkbox"/> Long distance	
	<input type="checkbox"/> Other	
<input type="checkbox"/> Reprographic services:	<input type="checkbox"/> Publications: (please list)	
<input type="checkbox"/> Blueprint copies		
<input type="checkbox"/> Standard photocopy		

SECTION D – Membership category		Dues payable in US dollars	
<input type="checkbox"/> GENERAL MEMBERSHIP		\$ 750.00/annually	
A General Member is any construction industry association or privately owned company defined as a “Builders Exchange” that produces a construction news report and/or operates a plan room (either physical or electronic).			
Primary member (<i>Executive</i>)		(Name)	(Title)
<input type="checkbox"/> INDUSTRY AFFILIATE MEMBERSHIP		\$ 750.00/annually	
An Industry Affiliate Member is a private or publicly held company or construction-related association providing products and/or services to the construction industry.			
Primary member (<i>Executive</i>)		(Name)	(Title)
SECTION E – Payment		Dues payable in US dollars	
Signature of executive member: _____ Date: _____			
<p>Dues may be paid by credit card (Visa, MC or Amex), check or electronic funds transfer.</p> <p>Please remit one (1) year’s dues, made payable to: Builder’s Exchange Network PO Box 45018 Kanata, ON, Canada K2M 2G9</p>			
Amount paid:		Check #:	
Credit card #:		Expiration date:	
Please provide the name of a BXNet member and association who will recommend you for membership			
To be completed by BXNet Board of Directors			
Approved:		Date:	
Not approved:		Date:	
Remarks:			

For further information, please contact BXNet at 855-719-0733 or info@bx-net.org.