



Air Conditioning Trade Association



ACTA
1112 N. Main St # 386
Manteca, CA 95336

APPLICATION FOR MEMBERSHIP
CALIFORNIA CONTRACTORS
E-mail form to jmojica@actrade.ac or fax to (916) 265-1982

ACTA Accounting Address:
P.O. Box 590
Marysville, CA 95901-0590

Select one of the following types of Membership:

Deluxe Membership:
\$2500

Full Membership:
\$1800

Associate Contractor:
\$1200

COMPANY INFORMATION:

Company Name: Telephone #:
Primary Contact: Fax #:
Alt. Contact: Alternate #:
Physical Address:
Mailing Address:
E-Mail Address:
Company Website Address:
Contractor License # and Classification:
Workers Compensation Carrier:
Number of Employees: Office Shop Service Annual Gross: \$
Number of qualified Journeymen:
Do you have a Health/Welfare benefits provider? Yes No
Equipment List (Complete inventory list on next page)

How did you hear about us?

* ACTA E-mail: *Postcard
* Info. dropped/mailed to office:
* Trade Show: Which Show:
* Referred by another company: Name of Company:
* Referred by another Association: Name of Association
* Spoke to ACTA Staff Member: Name of Staff Member:
* Other:

We accept Credit Card or Check

Please make checks payable to the Air Conditioning Trade Association.
P.O. Box 590. Marysville, CA 95901-0590

Company Signature Name Title Date

ACTA Signature Name Title Date





Air Conditioning Trade Association
Inventory Equipment List

SHOP EQUIPMENT:

In order for the apprentice to receive the training required by the Apprenticeship Standards, the Training Committee recommends that the employer's shop facility should contain the following minimum tools and equipment.

PLEASE CHECK OFF WHICH EQUIPMENT BELOW YOU HAVE IN YOUR SHOP:

- 1. 8' OR 10' Brake _____
- 2. 3' Roll _____
- 3. Easy Edger _____
- 4. Crimper/Elbow Machine _____
- 5. Pittsburg Roll Forming Machine _____
- 6. Shear Welder _____
- 7. Spot Welder _____
- 8. Arc Welder _____
- 9. Soldering Tools (irons & pot) _____
- 10. Work & Duct Liner Table _____
- 11. Bench Rules _____
- 12. Bench Square _____
- 13. Trammel Points _____

Upon the condition that your shop does not meet the minimum tool requirements, the Training Committee may exercise its rights under Article XI (B) of the Rules and Regulations to assure proper training.

COMMENTS: _____



CREDIT CARD AUTHORIZATION FORM

Company Name: _____

Card #: _____ Sec. #: _____ Exp: _____

Visa MasterCard Discover American Express

Name on Credit Card: _____

Address on credit card: _____ City: _____ Zip: _____

Phone: _____

Payment for: (please check all that apply for this payment only)

ACTA Deluxe Membership - \$2500.00

ACTA Full Membership - \$1800.00

ACTA Associate Membership - \$1200.00

Class Fees \$ _____

Other \$ _____ Description: _____

Signature: _____ Date: _____

◆ **Email my receipt to:** _____

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