



# MEMBERSHIP APPLICATION

SEALANT, WATERPROOFING & RESTORATION INSTITUTE

## SECTION 1: GENERAL INFORMATION

PLEASE PRINT OR TYPE ALL INFORMATION REQUESTED BELOW

DATE

COMPANY NAME			
PRINCIPAL CONTACT: FIRST NAME	MIDDLE INITIAL	LAST NAME	TITLE
COMPANY ADDRESS			
CITY		STATE OR PROVINCE	ZIP CODE
MAILING ADDRESS			
CITY		STATE OR PROVINCE	ZIP CODE
COUNTRY	PHONE	FAX	
EMAIL		WEBSITE	
REFERRED BY			

## SECTION 2: ADDITIONAL COMPANY CONTACTS

TWO ADDITIONAL COMPANY CONTACTS, LOCATED AT THE PRIMARY BUSINESS LOCATION, CAN BE INCLUDED IN THE DATABASE TO RECEIVE ALL SWRI MAILINGS AND INFORMATION.

NAME	TITLE	NAME	TITLE
PHONE	FAX	PHONE	FAX
ADDRESS (IF DIFFERENT)	EMAIL	ADDRESS (IF DIFFERENT)	EMAIL
CITY, STATE, ZIP		CITY, STATE, ZIP	

## SECTION 3: MEMBERSHIP CATEGORIES/ANNUAL DUES

CHECK ONE

### CONTRACTOR

Contractor voting membership shall include persons, corporations, partnerships or associations which install sealant, waterproofing or restoration materials. SWR Institute dues are effective from July 1 to June 30. Dues are based on annual sales.

#### Annual Dues:

(Annual gross sales – check appropriate sales category SWR Institute reserves the right to verify financial information.)

- \$1 – \$999,999 Annual dues \$600
- \$1,000,000 – \$2,499,999 Annual dues \$800
- \$2,500,000 – \$4,999,999 Annual dues \$1,000
- \$5,000,000 – \$9,999,999 Annual dues \$1,300
- \$10,000,000 and above Annual dues \$1,700

Dues are payable in US funds.

\*Canadian residents remit in Canadian funds.

Contractor applicants please completely fill out **section 6** on other side.

### MANUFACTURER

Manufacturing voting membership shall include any proprietorship or corporation engaged in manufacturing of sealant, waterproofing or restoration products which are sold to contractor members. SWR Institute dues are effective from July 1 to June 30. Dues are based on annual sales.

#### Annual Dues:

(Annual gross sales – check appropriate sales category SWR Institute reserves the right to verify financial information.)

- \$1 – \$2,999,999 Annual dues \$1,350
- \$3,000,000 – \$49,999,999 Annual dues \$1,750
- \$50,000,000 and above Annual dues \$3,500

Dues are payable in US funds.

\*Canadian residents remit in Canadian funds.

Contractor applicants please completely fill out **section 7** on other side.

### ASSOCIATE

Associate voting membership may be conferred upon any design professional, architect (AIA), engineer (PE) or other licensed professional including consultants, whose services are primarily in the sealant, waterproofing and restoration industry, provided that training certification can be provided via recognized industry associations, and whose expertise, experience or capability allows such person to contribute to the welfare of the sealant, waterproofing and restoration industry.

#### Annual Dues:

(Annual gross sales – check appropriate sales category SWR Institute reserves the right to verify financial information.)

- \$1 – \$999,999 Annual dues \$600
- \$1,000,000 – \$9,999,999 Annual dues \$800
- \$10,000,000 and above Annual dues \$1,000

Dues are payable in US funds.

\*Canadian residents remit in Canadian funds.

Contractor applicants please completely fill out **section 8** on other side.

### SENIOR

Senior voting membership may be conferred upon any individual representative or employee who has retired or semi-retired with a Contractor, Associate or Manufacturer member company. SWR Institute dues are effective from July 1 to June 30. Dues are based on a per-person basis.

#### Annual Dues:

- \$250 Dues are payable in U.S. funds\*

\* Canadian residents remit in Canadian funds.

Senior applicants please fill out completely **section 9** on other side of form.

## SECTION 5: ADDT'L BRANCH MAILINGS

Addt'l Branch Mailings \_\_\_X \$50.00 per year  
If your company has more than one office and would like the additional branches to receive key mail (Applicator magazine, Member Briefs newsletter, promotional pieces, emails, etc.), please attach a separate sheet with the additional branch's contact information.

## SECTION 4: MEMBERSHIP INITIATION FEE

Applicants applying for membership must pay a \$400 initiation fee upon approval for membership (the "Initiation Fee"). The new member may apply this Initiation Fee to the new member's first meeting registration fee at one of the next three (3) SWR Institute Fall or Winter Technical Meetings subsequent to the date of the new member's approval for membership. If the new member fails to apply the Initiation Fee towards a meeting registration as provided herein, the Initiation Fee shall be forfeited to SWR Institute's general operating fund. Initiation fee not applicable to senior membership category.

## SWR INSTITUTE PROCEDURE FOR MEMBERSHIP

- Prospective members must complete all sections of the membership application that apply.
- DO NOT SEND PAYMENT AT THIS TIME. You will be billed at the appropriate time.
- Upon review of your application, the membership committee will forward the application to the SWR Institute Board of Directors at their next regularly scheduled meeting for further action.
- The SWR Institute Board of Directors will formally act on the application. All applicants will be contacted within ten (10) working days of the meeting informing them of the board action.
- The approved applicant must make payment of the appropriate dues within thirty (30) days of the formal notification of the pending membership.

SEALANT, WATERPROOFING & RESTORATION INSTITUTE

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## SECTION 6: CONTRACTOR COMPANY PROFILE

It is important to complete the following information as it will be used to develop a descriptive profile of your company. This information will then be used for the membership listing and web site resources. Please answer all questions.

Year company established: \_\_\_\_\_

Years in the sealant, waterproofing and restoration industry: \_\_\_\_\_

Do you have approved applicator status with any manufacturers?  Yes  No

If yes, please list manufacturers

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

List three recent projects and what work you did on them. *(May attach separate sheet.)*

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please list other professional affiliations:

\_\_\_\_\_  
\_\_\_\_\_

Identify geographical distribution of work. (ex. Maine 75%, other US 20%, International 5%)

\_\_\_\_\_

What is your primary business base? (By percentages)

Industrial \_\_\_\_\_  
Commercial \_\_\_\_\_  
Multi-residential \_\_\_\_\_  
Institutional \_\_\_\_\_  
Total 100%

What is the type of work you do? (By percentages)

Renovation \_\_\_\_\_  
New Construction \_\_\_\_\_  
Historic Restoration \_\_\_\_\_  
Total 100%

Work Categories: (By percentages)

Sealants \_\_\_\_\_  
Above Grade Waterproofing (elastometric, etc.) \_\_\_\_\_  
Below Grade Waterproofing \_\_\_\_\_  
Concrete Restoration \_\_\_\_\_  
Roofing \_\_\_\_\_  
Deck Coating Systems \_\_\_\_\_  
Floor Coating System \_\_\_\_\_  
Masonry Restoration \_\_\_\_\_  
Concrete Repair \_\_\_\_\_  
Polymer & Wall Coatings \_\_\_\_\_  
Other \_\_\_\_\_  
Total 100%

## SECTION 7: MANUFACTURER COMPANY PROFILE

It is important to complete the following information as it will be used to develop a descriptive profile of your company. This information will then be used for the membership listing and web site resources. Please answer all questions.

Year company established: \_\_\_\_\_

Years manufacturing products for the sealant, waterproofing and restoration industry: \_\_\_\_\_

Do you have an approved applicator program?  Yes  No

If yes, for what products

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

List three recent projects you were involved in and the products you manufacture that were used. *(May attach separate sheet.)*

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please list other professional affiliations:

\_\_\_\_\_  
\_\_\_\_\_

Identify geographical distribution of work. (ex. Maine 75%, other US 20%, International 5%)

\_\_\_\_\_

What is your primary business base? (By percentages)

Industrial \_\_\_\_\_  
Commercial \_\_\_\_\_  
Multi-residential \_\_\_\_\_  
Institutional \_\_\_\_\_  
Total 100%

What is the type of work you do? (By percentages)

Renovation \_\_\_\_\_  
New Construction \_\_\_\_\_  
Historic Restoration \_\_\_\_\_  
Total 100%

Work Categories: (By percentages)

Sealants \_\_\_\_\_  
Above Grade Waterproofing (elastometric, etc.) \_\_\_\_\_  
Below Grade Waterproofing \_\_\_\_\_  
Concrete Restoration \_\_\_\_\_  
Roofing \_\_\_\_\_  
Deck Coating Systems \_\_\_\_\_  
Floor Coating System \_\_\_\_\_  
Masonry Restoration \_\_\_\_\_  
Concrete Repair \_\_\_\_\_  
Polymer & Wall Coatings \_\_\_\_\_  
Other \_\_\_\_\_  
Total 100%

## SECTION 8: ASSOCIATE COMPANY PROFILE

It is important to complete the following information as it will be used to develop a descriptive profile of your company. This information will then be used for the membership listing and web site resources. Please answer all questions.

Year company established: \_\_\_\_\_

Years in the sealant, waterproofing and restoration industry: \_\_\_\_\_

List three recent projects you were involved in. *(May attach separate sheet.)*

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Complete one or more of the sub-sections below in which you qualify as an Associate Member:

A) You or a member of your staff are a Professional Engineer (PE) or a Registered Architect (RA). Please list the individual and his/her qualification:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

B) You or a member of your staff possess a minimum of five years experience as a consultant in the sealant, waterproofing and restoration industry. Please list the individual that has the minimum five years experience as a consultant in the industry:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please list a reference that can verify the individual's five years of experience as a consultant in the industry:

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

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

Phone: \_\_\_\_\_

C) You or a member of your staff holds a certification from a recognized industry association (related to the sealant, waterproofing, or restoration industry). Please list the organization(s) and what certification(s) you hold (Find a list of the recognized industry associations on our website: [www.swrionline.org](http://www.swrionline.org)):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Identify geographical distribution of work. (ex. Maine 75%, other US 20%, International 5%)

\_\_\_\_\_

What is your primary business base? (By percentages)

Industrial \_\_\_\_\_  
Commercial \_\_\_\_\_  
Multi-residential \_\_\_\_\_  
Institutional \_\_\_\_\_  
Total 100%

What is the type of work you do? (By percentages)

Renovation \_\_\_\_\_  
New Construction \_\_\_\_\_  
Historic Restoration \_\_\_\_\_  
Total 100%

Work Categories: (By percentages)

Sealants \_\_\_\_\_  
Above Grade Waterproofing (elastometric, etc.) \_\_\_\_\_  
Below Grade Waterproofing \_\_\_\_\_  
Concrete Restoration \_\_\_\_\_  
Roofing \_\_\_\_\_  
Deck Coating Systems \_\_\_\_\_  
Floor Coating System \_\_\_\_\_  
Masonry Restoration \_\_\_\_\_  
Concrete Repair \_\_\_\_\_  
Polymer & Wall Coatings \_\_\_\_\_  
Other \_\_\_\_\_  
Total 100%

## SECTION 9: SENIOR MEMBER PROFILE

SWR Institute Member Company with which you were affiliated: \_\_\_\_\_

How many years were you employed with or owned this company? \_\_\_\_\_

Years company was an active SWR Institute member company in good standing (i.e. 1980-2001) \_\_\_\_\_

Your company was an:

SWR Institute Contractor Member  SWR Institute Manufacturer Member  SWR Institute Associate Member

Your company was a:

SWR Institute Contractor Member  SWR Institute Manufacturer Member  SWR Institute Associate Member

## SECTION 10: MEMBERSHIP AGREEMENT

I do hereby make application for membership in the Sealant, Waterproofing & Restoration Institute and agree to abide by the articles of incorporation and bylaws of the Institute and pay all duly levied dues and assessments. It is also understood that to qualify for membership, our company must have been in the sealant, waterproofing or restoration business for at least one year. The undersigned warrants the accuracy of the information contained herein.

Signature: \_\_\_\_\_

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

Date: \_\_\_\_\_

Return this form to: Sealant, Waterproofing & Restoration Institute

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