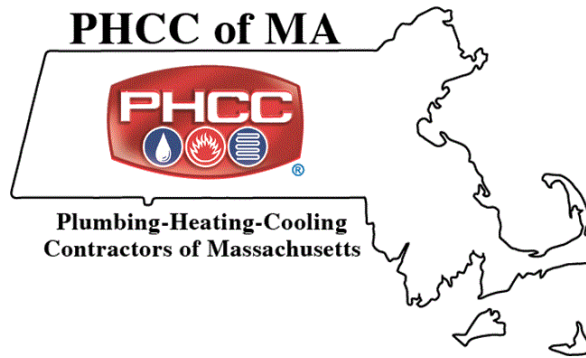




2026 Associate Membership Application

Contact Name: _____ Title: _____
Company Name: _____
Address: _____ Application Date: _____
City: _____ State: _____ Zip Code: _____
Telephone: _____ Fax: _____
E-mail: _____ Website: _____

Type of Associate Member

Wholesaler ☐ Manufacturer ☐ Manufacturer's Rep ☐ Other ☐

If Other is checked, please specify what PHCC related field: _____

Member Benefits:

- Access to PHCC of MA Contractor Member information for direct mail application
- Access to monthly local Chapter meetings for presentations and networking
- Significant discounts on Gas Venting Labels and Direct Venting Signs
- *New England Progress Magazine*
- Discount on Code Books for resale
- Discount on Venting labels and Direct vent Signs
- Significant discounts on booths at Annual Trade Show
- Significant discounts on advertisements placed in *New England Progress Magazine*

2026 PHCC Associate Membership Dues: \$950 per year

Dues Payment Options: ☐ Check ☐ Visa ☐ MasterCard ☐ Amex

Credit Card #: _____ Exp. Date: _____ Sec.Code _____

Name on Card: _____ Signature: _____

Working Together for a Better Industry