



## Northern New Jersey Chapter, Inc.

213 Summit Road, PO Box 1081, Mountainside, NJ 07092-0081

Tel: (908) 654-5770 Fax: (908) 654-1754

www.necannj.com ChapterOffice@nnjneca.com

### APPLICATION FOR ASSOCIATE MEMBERSHIP

Company Name \_\_\_\_\_

Accredited Representative \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Telephone \_\_\_\_\_ Fax \_\_\_\_\_

E-mail Address \_\_\_\_\_

Company Website \_\_\_\_\_

Annual Dues: \$500.00

Please make check payable to: Northern New Jersey Chapter, NECA  
213 Summit Road  
PO Box 1081  
Mountainside, NJ 07092

Northern New Jersey Chapter, NECA, Bylaws –

IV:05 2. Any candidate for Associate membership must be approved by a majority vote of the Board of Directors provided, however, that said membership can be retracted at the absolute discretion of the Board of Directors.

Date Approved by BOD: \_\_\_\_\_