



2008-2009 Board Member Application

Company Name: _____
Contact Person: _____
Address: _____
City: _____ State: _____ Zip: _____
Phone: _____ Fax: _____
Website: _____
Email: _____

Classifications (Required-Check all that Apply):

- | | |
|---|---|
| <input type="checkbox"/> Residential Contractor | <input type="checkbox"/> Equipment Supplier |
| <input type="checkbox"/> Commercial Contractor | <input type="checkbox"/> Consultant |
| <input type="checkbox"/> Material Supplier | <input type="checkbox"/> Engineer |
| <input type="checkbox"/> Specialty Trade: _____ | <input type="checkbox"/> Homeowners Assoc |
| <input type="checkbox"/> Insurance Provider | <input type="checkbox"/> Building Owners |
| <input type="checkbox"/> Manufacturer | |

Application & Signature

I understand that by submitting my personal and/or business information to Colorado Gutter Association (CGA) that I am consenting to receive electronic transmissions via fax, emails, & other means of communication from CGA and its sponsors and affiliates regarding my Board Position. I also am certifying that I am willing to support CGA and its events.

- ✓ I will attend the quarterly meetings and help plan and organize them.
- ✓ I will attend the annual recognition event and help plan and organize the event.
- ✓ I will agree to honor CGA's commitment to promote and agree to Advertise Truthfully, Honor Agreements both written and verbal, Address Disputes Quickly and honestly, Approach all aspects of business with Integrity, and Most importantly I must Establish and Maintain a Positive Track Record in the Gutter Industry.
- ✓ I understand that I must be affiliated with a member organization to serve on the Board
- ✓ I understand that my term will be considered a one-year term.

Signature: _____
Printed Name: _____
Date: _____