

**Frederick County Master Plumbers Association
Application for Membership**

Name* _____ Company Name* _____

Address _____ City, State, Zip _____

Position _____ Business telephone number* _____

Fax _____ Cell Phone** _____

E-mail address* _____

Company Web Site* _____

Master Plumber? Yes ___ No ___ Maryland State License Number: _____

Frederick County License Number _____

What other counties/states do you hold licenses? _____

What type of work does your company perform? _____

What areas/region does your company serve? _____

Additional information about yourself or your company: _____

** This information may be used on our web site unless indicated otherwise – see below.*

*** For Association use only*

Please do not include my information on the Frederick County Master Plumbers' web site.

Please find attached my membership dues of \$100 – check made payable to Frederick County Master Plumbers Association.

Please also find attached one of my business cards.

Applicant Signature _____ Date _____

Mail Application and Dues to:
Frederick County Master Plumbers Association
PO Box 3452
Frederick, MD 21705