



ALCC application for membership through June 30th, 2019

(Below prices prorated to reflect remaining membership year)

Referred by: (please include name and company) _____

Section A: Member Data

Company: _____ **Contact person:** _____

Address: _____ **Phone:** _____

Email: _____ **Website:** _____

Business Cycle: Start up Growth Mature Legacy **Mobile #:** _____

Social media that you participate in: LinkedIn Facebook Twitter Pinterest Houzz Other _____

Chapter: Denver Mountain Northern Southern Southwest Western Out of State **# Years in business:** _____

Why did you choose to join ALCC: _____

Gross annual sales: \$ _____ **Number of employees:** _____

Section B: Landscape service company information

Type of work: Commercial Residential Government **Landscape Industry Certified Technician on staff?** yes no

Staff qualifications: Certified Arborist Licensed Pesticide Applicator CLIA CIC CID Landscape Architect

Services offered: Installation Maintenance Design Irrigation Snow Removal Tree Care

Company is an H-2B visa user Company is an H-2A visa user **Entry level labor wage:** _____

Section C: Choose your member category:

Company Type:

Gross Annual Sales

<input type="checkbox"/> Landscape Architecture or design only	<input type="checkbox"/> Class A: Under \$100,000 \$293	<input type="checkbox"/> Class E: \$1-5 Million \$1121
<input type="checkbox"/> Lawn care company	<input type="checkbox"/> Class B: \$100,001-200,000 \$484	<input type="checkbox"/> Class F: \$5-10 Million \$1399
<input type="checkbox"/> Commercial only company	<input type="checkbox"/> Class C: \$200,001-500,000 \$633	<input type="checkbox"/> Class G: \$10-15 Million \$1766
<input type="checkbox"/> Residential only company	<input type="checkbox"/> Class D: \$500,001-Million \$844	<input type="checkbox"/> Class H: >\$15 Million \$2108
<input type="checkbox"/> Irrigation only company		
<input type="checkbox"/> Full service landscape company		
<input type="checkbox"/> Gardening company		

Suppliers: Any business that offers products or services to the landscape industry and landscape contractors including nurseries, equipment dealers, irrigation suppliers, chemical/fertilizer companies, etc. Dues based on gross annual sales.

<input type="checkbox"/> Class 1: Under \$250,000 \$293	<input type="checkbox"/> Class 3: \$501,000-Million \$825
<input type="checkbox"/> Class 2: \$251,000-500,000 \$502	<input type="checkbox"/> Class 4: >\$1 Million \$986

Affiliate: Governmental or quasi-governmental entity, educational institution, municipalities and their agencies **\$17**

Retired: Individual who has maintained ALCC membership, but retired and no longer with a company that provides landscape services or products in Colorado. **\$35**

Section D: Authorization

Affidavit of Understanding: I hereby certify that the above information is true and correct and that I have accurately represented our company. I understand that membership is valid through June 30, 2019 and will be up for renewal on an annual basis thereafter. I further certify that our company possesses current workers' compensation insurance and vehicle liability insurance, as well as proper pesticide licensing and other permits as applicable and will uphold all other requirements dictated by Colorado law. I understand that my commitment as an ALCC member is to maintain the above licenses, insurance and permits as they pertain to my business. I also pledge to uphold ALCC's standards of conduct (visit www.alcc.com) and will strive for excellence in my business. Two percent of my dues payment is not tax deductible because it is allocated to lobbying. On behalf of my organization, I am authorized and hereby consent for the organization to receive emails sent by, or on behalf of, ALCC so that we may take full advantage of ALCC programs.

Signature: _____ **Date:** _____

Section E: Payment

Check Credit Card: _____ 3 or 4-digit sec code: _____ Exp. _____

Billing Address: _____ **Cardholder Name:** _____

Dues Total: \$ _____ **Cardholder Signature:** _____