

Metrolina Minority Contractors' Association (MMCA)

125 North Irwin Avenue
Charlotte, North Carolina 28202
704-332-5746 Office
704-332-5990 Fax
mmcaofcharlotte@yahoo.com
Since 1988

MEMBERSHIP APPLICATION

Membership Fee Structure (Voted New Fees into effect 07/12/03)

City/County/Government/Corporate	\$2,500.00
General Contractor	1,000.00
Construction Contractor/Sub-Contractor	300.00
Non-Construction Contractor	250.00
Start-Up Business (Less than one year in business)	100.00

Date: _____

Company/Agency: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Mailing Address/PO Box: _____

City: _____ State: _____ Zip: _____

Office Phone: _____ Cell: _____ Fax: _____

Email: _____ Website: _____

President/Owner: _____

Contact Person: _____

Type of Business: Sole Proprietor _____ Partnership _____ Corporation _____

Year Business Was Established: _____ Number Of Employees: _____

Primary Scope of Work: _____

Certification Agency(ies): _____

To complete application, please enclose a copy of:

City Business License(s)

State Business License(s)

Minority Certification

Other Certification(s) - SBE/MWBE, OSHA, DBE & HUB

All members are asked to actively support at least one of MMCA's Standing Committees:

Program Development ___ Finance/Budget/Fundraising ___ Legal/Legislation ___

Membership ___ Contract Opportunities ___ Nominating & Awards ___ Fund Raising ___

Make your check payable to: Metrolina Minority Contractors' Association, and include the
Check Amount: _____ and Check #: _____

"THANK YOU FOR YOUR MEMBERSHIP"

Membership Training

Capacity Building Training as needed for your company.

- Estimating
- Bidding
- Contract Negotiations
- Bonding and Insurance
- Project Management and Scheduling
- Paying Taxes and General Accounting
- Certifications/City/State/etc.
- Invoices AIA and Change Orders
- Marketing and Public Relations
- Business Plans

Any other please specify:

Barrier and Needs of Your Company

Barriers: _____

Needs: _____

Training Survey Your Best Time For Training

First Best Time for Training

Days of the Week: _____

Time of Day: _____

Hours of Training: _____

Second Best Time for Training

Day of the Week: _____

Time of Day: _____

Hours of Training: _____

Third Best Time for Training

Day of the Week: _____

Time of Day: _____

Hours of Training: _____

Committee Will Work On

- Program Development
- Finance/Budget/Fundraising
- Membership
- Legal/Legislation
- Contract Opportunities
- Nomination and Awards

Member Profile

Company _____

Owner's Name _____

Street Address _____

Telephone# _____ Fax# _____

Contact Person _____

Type of Business _____ Construction _____ Service _____ Manufacturing _____ Retail _____

Consulting _____ Other _____

of Business _____ # of Employees _____ Office _____ Field _____

Primary Source of Business Income _____

Dollar Amount Largest three Contracts: _____

Dollar Amount Smaller three Contracts: _____

Most of your work is performed as: _____ Prime Contracted _____
Subcontractors _____

What is the distance you are able to travel for a job _____ mile radius?

What equipment do you own: Office- _____

Field- _____

What equipment do you have access to: Office- _____

Field- _____