

**MEMBERSHIP APPLICATION
Home Builders Association of Lake County**

1100 N Joanna Avenue Tavares, FL 32778
Phone 352-343-7101 Fax 352-343-4650
Email: admin@lakehba.com Website: lakehba.com

Applicant Name _____ Phone () _____ Fax () _____

Company Name _____ Email _____

Mailing Address _____ Website _____
Street/PO Box City State Zip

Contractor License # _____ License Name _____

Occupational License _____ Years in Business _____ Type of Business _____

Builder

Dues \$400.00

Associate

Dues \$345.00

Affiliate

\$50.00

(Requires a full membership
locally in the same company)

Link my website to the HBA website for \$30 for a year (great way for people to see what you do)

“Dues payments to the Home Builders Association of Lake County are NOT tax-deductible as charitable contributions for federal tax purposes, but may be deductible as an ordinary and necessary business expense. Your dues for annual membership to the Home Builders Association of Lake County include \$150.00 for membership in the National Association of Home Builders, and \$85.00 for membership in the Florida Home Builders Association. A portion of your 2010 dues to the National Association of Home Builders and FL Home Builders Association is used for lobbying and is not deductible for tax purposes. The non deductible portion of your 2010 NAHB dues is 16% and the non deductible portion of your 2010 FHBA dues is 62%.

\$5 of your local dues is allocated to the HBA Political Action Committee (PAC) and \$10 of your FHBA dues is allocated to FHBA PAC. These allocations are optional, and if you DO NOT want these allocations made, please check below and the amounts will be retained in the respective operating funds accordingly.

Check here for HBA Lake – PAC

Check here for FHBA – PAC

Please provide 2 references:

1 _____ 2 _____

I agree to abide by the by-laws and Code of Ethics of the Home Builders Association of Lake County, the Florida Home Builders Association and the National Association of Home Builders. You may contact me by phone, fax or email for industry news and meeting notices.

Applicant's Signature

Date

HBA Sponsor's Name (the member you would like
credited for recruiting your company)

Reason for Joining – Check all that apply: () Increase Business () Insurance () Networking () Social () Governmental Affairs () Member Discounts () Educational & Training Opportunities () Other _____

Credit Card Information

Visa MasterCard
Account # _____ Exp Date _____

Name Printed on Card _____

Signature of Cardholder _____

Your Billing Zip Code _____

For Office Use Only

Date Received _____

Dues Paid _____ PAC _____

Check # _____ Cash _____ CC _____

License Check _____