

TREE CARE INDUSTRY ASSOCIATION

Advancing tree care businesses.

AFFILIATE APPLICATION

	HOW DO WE GET IN TOUCH W	VITH YOU?	🗆 Woman Owned
	Company Owner		
What areas of your business would you like to focus on first?	Company Name		
	Street Address		
Safety	City		
Workforce Development	Phone W		
Advocacy and Regulatory Compliance	Email W		
Training			
Sales and Marketing	TELL US ABOUT YOUR COMPANY	Required informatio	<i>n.</i> Business Start Date: / /
 Business Strategy Other 	# Employees: Spanish Speaking	% # Branche	·s:
	Primary Business (must add up to 100%) Residential: % Commercial	_% Utility	% Municipal %
Where did you hear about TCIA?	INCLUDE THESE ITEMS ALONG WITH YOUR APPLICATION Required to process the application.		
	1. General Liability Insurance Certificate (required for ALL TCIA tree care company members)		
	2. Workers' Compensation Insurance Certificate (only if it is required in your state for the number employees in your company or if confirmation of exemption from coverage) Please have your agent name TCIA as the certificate holder and email to memberservices@tcia.org, mail to the address below.		
	TREE CARE INDUSTRY ASSOCIATION A	ttn: Membership	Department
	670 N. Commercial Street, Suit	e 201, Manchester,	NH 03101
	Total amount due: \$399 USD	PAYMENT	
ote: TCIA cannot accept credit rd payment via email.			Visa/MasterCard/Amex/Discover
ues payments are tax deduct-	Your membership will begin upon receipt of the following items:	I would like to sign	up for automatic renewals.
le as ordinary and necessary isiness expenses.	 This completed membership application 2. Payment of \$399* USD (Checks payable to: TCIA) 3. Proof of certificate of Public and Employer's Liability Insurance showing General Liability and Workers Compensation coverage (unless you provide Proof of Exemption / Sole Proprietor) - email confirmation accepted. 	Membership term is	ou will receive an email about the process. for 12 months. To change your automatic
IA estimates that 95% of your us payment is deductible as a			contact Member Services at 603-314-5380 ore billing occurs. There are no refunds on
siness expense (5% is not eductible due to TCIA's direct bbying activities on behalf of			CVV
s members).	commation accepted.	Exp. Date//	,
NERIC2024		Name on Card	
For internal use only, this information is confidential and will n		ot	
be shared with any other outside organization or agency.			