

MEMBERSHIP

5911 Harbour View Blvd.,
Suite 220
Suffolk, VA 23435



2020

APPLICATION

Phone: (757) 484-7500
www.hruhca.com

(Please complete form and email to srogers@hruhca.com or send via mail)

Firm Name _____

Address _____ City _____ State _____

Zip Code _____ Phone _____ Fax _____

Email _____ Firm's Representative _____

Type of Business _____

Investment in Your Future

Membership Category:

Contractor ____

\$1200/year
(or prorated equivalent)

Associate ____

\$1200/year
(or prorated equivalent)

Municipality ____

\$250/year
(or prorated equivalent)

We will pay by: ____ Check or *Credit Card: ____ Visa ____ MC ____ AMEX (*3.5% service fee is charged)

I authorize \$_____ to be charged to my account.

Account number _____ Expiration _____ Security code _____

Name on card _____

Signature _____ Telephone _____

Your membership will automatically renew and you authorize us to collect the membership dues, using the payment method we have on record for you. You may cancel your membership with a 30 day written notice prior to January 1, 2021.

I agree to abide by the bylaws of the Hampton Roads Utility & Heavy Contractors Association.

Applicant:

Sponsored by (optional):

Firm

HRUHCA Member Firm

Representative

Member Representative

Questions? Please contact HRUHCA Executive Director
Stephanie Rogers at the HRUHCA office or email

srogers@hruhca.com

Date