

REFERRED BY: _____

NEW MEMBER

RENEWAL

CONTACT INFORMATION

Full Name _____

Company _____

Phone _____

Email _____

Billing Address _____

City _____ State _____ Zip Code _____

PAYMENT INFORMATION

Card # _____

Exp. _____ CVV _____ Zip Code _____

Name on Card _____

Visa

Mastercard

Amex

MEMBERSHIP TYPE: _____ **(Starts at \$850)**

DONATIONS & CONTRIBUTIONS (SUGGESTED AMOUNT \$50)

BPAC: Builders Political Action Committee _____

BTPAC: Builder Together Political Action Committee _____

HomeAid Atlanta Donation _____

Please email this form to hwexler@atlantahba.com

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