



2022 CRMCA Membership Application

We hereby apply for membership in the Colorado Ready Mixed Concrete Association and agree to abide by the Articles of Organization and by-laws of this Association as well as the standards and usage thereof, and such amendments thereto as may be subsequently enacted. We agree to pay all dues and/or assessments as may be legally assessed against members.

There are five types of CRMCA members:

Concrete Producer Members

Companies that are actively involved in the production of ready mixed concrete.

Cement Producer Members

Companies that produce cement.

Associate Members

Companies that provide a product or service to the ready mixed concrete industry.

Small Associate Members

Companies that provide a product or service to the ready mixed concrete industry with less than three employees.

Concrete Contractor Members

Construction companies that purchase concrete that is used during the course of their project.

Annual Concrete Producer Member Dues:

- 1 - 10 trucks Annual Flat Rate \$1,350
- 11 - 70 trucks Rate per truck annually \$215
- 71 - 125 trucks Rate per truck annually \$210
- 126 or more trucks Rate per truck annually \$200

Annual Cement Producer Member Dues are \$10,000.

Annual Associate Member Dues are \$900.

Annual Small Associate Member Dues are \$600.

Annual Concrete Contractors Member Dues are \$500.

(Company Name) _____ is eligible to become a (check box)

Producer Member Associate Member Small Associate Member Contractor Member

Number of Trucks (if a ready mixed concrete producer) _____

Company Name _____

Signature of Authorization _____

Printed Name _____ Date _____

Company Address _____



City _____ State _____ Zip _____

Website _____

Primary Phone _____

Contact Name _____

Contact Email _____

Counties Served (if producer member) _____

Products and Services _____

Please Provide contact information for key personnel within the organization for use in the CRMCA Member Directory. Attach additional sheets to provide additional contact information if necessary.

Name _____

Title _____

Phone _____

Email _____

Name _____

Title _____

Phone _____

Email _____

Name _____

Title _____

Phone _____

Email _____

Name _____

Title _____

Phone _____

Email _____

Name _____

Title _____

Phone _____

Email _____

Accounts Payable Information

Name _____

Title _____

Phone _____

Email _____

Please return completed form to:

Email: emma@coloradocaa.org or Mail: 6880 S. Yosemite Ct., #100 Centennial, CO 80112