

WECA Contractor Membership Application

I wish to apply for Contractor Membership with Western Electrical Contractors Association Inc. (WECA). If accepted into membership, I agree to abide by WECA bylaws and rules and regulations in force during my membership. I understand that, upon receipt of my application for membership, WECA may request a credit report to determine eligibility for membership.

Corporate Name:	Com	ipany Name:
Address:		
City:	State:	ZIP:
Mailing Address (if different from above):		
City:	State:	ZIP:
Business Phone:		
Website Address:		
(Note that, by providing your business' website address, you con encouraged to link to the WECA site from your business' website		/ECA to put a link to this website on the WECA website. You are
Contractor's License Number(s): C10		C7
California Employer Account Number (CEAN):		
Employer Identification Number (EIN):	(Required	for Tax Reporting Purposes)
* * * * * * * * * * * * * * * * * * *	oly): □ WECA al or Commu	Web site 🗆 Referred by: nity Event By Mail
Reasons for joining WECA (check all that apply): Support Governmental Affairs Industry Discoun Public Works and Prevailing Wage Support Lega	ts 🗆 Commu	
Are there benefits or services we don't yet offer, w	hich would b	e valuable to you?
* * * * * * * * * * * * * * * * * * * *	* * * * * *	* * * * * * * * * * * * * * * * * * * *
Authorized Representative Name:		
Authorized Representative Signature:		Date:
Thank you for supporting WECA! Please mail, scan, or f	5 11	plication, Dues Sheet, a check for your first month's

dues, and Preferred Method of Contact and Communications Recipient forms to WECA Membership at the address, email, or fax number listed below. If emailing or faxing application please mail check separately, attn to: WECA membership.

3695 Bleckely Street, Rancho Cordova, CA 95655 Fax: (916) 452-7011 Email: membership@goweca.com

Preferred Method of Contact Form

In an effort to "go green", WECA has configured its database to automatically send communications to Members based on their preferred method of contact (email or regular mail).

Please identify the correct contact information for each employee who should receive communications from WECA.

Examples of important communications include: student final grades, disciplinary letters, class notification letters, dispatches, Monthly Apprentice Hours Worksheets and Membership Invoice.

Mandatory

Owner/President/Decision Maker:		
Title:	Email:	
Mobile Number:	Phone Number:	Ext:
Mark only one Preferred Method of Contact:	Email Mail (To Business Address on Fil	e)
Check one or more: 🗌 Membership Dues Invo	nices 🔲 Newsletters/E-Bulletins	
rr		
Company Name:		
Primary Contact	Title:	
Primary Contact: E-mail:		
Phone Number:	T 4	
Mark only one Preferred Method of Contact:	Email Mail (To Business Address on Fi	1e)
Check one or more: Monthly Apprentice Hou	ırs Worksheets & Reminder Notices 🗌 Month	ly Membership Dues
Invoices 🗌 Apprentice Progression & Disciplin	e Letters 🗌 Dispatch Forms 🗌 Newsletters/	E-Bulletins
1	Additional Staff (Optional)	
Name	Title:	
Name E-mail:		
Phone Number:		
Mark only one Preferred Method of Contact:		ile)
<u>Check one or more:</u> Monthly Apprentice Hou	rs Worksheets & Reminder Notices 🗌 Month	ly Membership Dues
Invoices Apprentice Progression & Disciplin		
N	Title	
Name E-mail:	Title: Ext:	
Phone Number:		
Mark only one Preferred Method of Contact:	Email Mail (To Business Address on Fil	le)
Check one or more: Monthly Apprentice Hou	rs Worksheets & Reminder Notices 🗌 Month	ly Membership Dues
Invoices Apprentice Progression & Disciplin		-
Name		
E-mail:	Ext:	
Phone Number:		
Mark only one Preferred Method of Contact:	Email Mail (To Business Address on File	2)
Check one or more: Monthly Apprentice Hou		
Invoices 🗌 Apprentice Progression & Disciplin	e Letters 🔲 Dispatch Forms 🗌 Newsletters/H	B-Bulletins

Additional Company Locations

To better serve all your membership please list the STREET ADDRESS, CITY & STATE for all of the locations where you currently do business (throughout the nation)

You May Omit the Primary Address on the Application

Address 1:				
	Street	City	State	Zip
Address 2:				
	Street	City	State	Zip
Address 3:				
	Street	City	State	Zip
Address 4:				
	Street	City	State	Zip
Address 5:				
	Street	City	State	Zip

Additional Company Recipients of WECA Newsletters and e-Bulletins

We recognize that there are additional employees who would benefit from receiving news and industry updates from us.

Please identify the contact information for each employee who should receive WECA's e-Newsletters which center on industry, legal, political, and training news.

Company Name:		
Employee Name 1:	E-mail 1:	
Employee Name 2:	E-mail 2:	
Employee Name 3:	E-mail 3:	
Employee Name 4:	E-mail 4:	
Employee Name 5:	E-mail: 5	

PLEASE MAKE ADDITIONAL COPIES AS NEEDED



CALIFORNIA MONTHLY MEMBERSHIP DUES

WECA monthly membership dues are denoted in the TOTAL column on the right. Dues are determined from your prior year's gross sales volume generated under your C10/C7 license. Please select your TOTAL dues selection in the far right column.

Previous Year's Gross Sales Volume	Monthly Dues	Monthly PAC	TOTAL MONTHLY DUES
Emerging*	\$40.00	\$15.00	\$55.00
\$0 - \$150,000	\$70.00	\$25.00	\$95.00
\$150,001 - \$250,000	\$100.00	\$40.00	\$140.00
\$250,001 - \$500,000	\$185.00	\$50.00	\$235.00
\$500,001 - \$700,000	\$250.00	\$55.00	\$305.00
\$700,001 - \$1,000,000	\$310.00	\$60.00	\$370.00
\$1,000,001 - \$2,000,000	\$370.00	\$70.00	\$440.00
\$2,000,001 - \$3,000,000	\$430.00	\$85.00	\$515.00
\$3,000,001 - \$4,000,000	\$500.00	\$130.00	\$630.00
\$4,000,001 - \$5,000,000	\$570.00	\$170.00	\$740.00
\$5,000,001 - \$10,000,000	\$630.00	\$295.00	\$925.00
\$10,000,001 - \$20,000,000	\$660.00	\$435.00	\$1,095.00
\$20,000,001 - \$50,000,000	\$725.00	\$885.00	\$1,610.00
\$50,000,001 - \$100,000,000	\$745.00	\$1,000.00	\$1,745.00
\$100,000,001 - \$150,000,000	\$865.00	\$1,600.00	\$2,465.00
\$150,000,001 - \$200,000,000	\$900.00	\$1,800.00	\$2,700.00
\$200,000,001+	\$930.00	\$2,000.00	\$2,930.00

*<u>Emerging Contractor Member Category</u>: Offered to California electrical contractors formed within the past two years with an annual sales volume of less than \$250,000. To take advantage of this special category, please contact your Membership Representative (membership@goweca.com) or call 877-444-9322.

WECA members may opt to reallocate the Monthly Political Action Committee (PAC) contribution to either of the following instead.

WECA General Fund WECEF (Scholarships and educational opportunities)

All members must comply with WECA's Billing and Collection Policies (included in the WECA Member Handbook). Dues are invoiced the week prior to the 1st of each month and are payable by the 15th of each invoiced month.

Company Name:	
Authorized Representative Name:	
Title:	
Authorized Representative Signature:	
Date:	_ Membership Start Date:
.	

Memberships become effective on the 1st of every month

Please provide the following information which will only be used for statistical purposes:

Prior calendar year average total number of employees (field & office) _

WECA dues, excluding PAC, are not considered Charitable Contributions for Federal Income Tax purposes, but MAY be considered ordinary and necessary business expenses. Please consult your tax advisor for guidance.



WHY DONATE REGULARLY TO WECEF?

It's all about giving back to the community and to the industry! The Western Electrical Contractors Education Foundation is a 501(c)(3) and depends on charitable contributions in order to sponsor the following education and research initiatives:

- Implement a robust scholarship program for electricians in need and/or who demonstrate excellence in industry-related contests
- Obtain education grants for research designed to contribute to workforce development and education in the electrical industry
- Collaborate with other nonprofit organizations in charitable events that give back to our communities in California

It's also about dependable funding for WECEF! In previous years, the Apprenticeship Training Committee could contribute to funding for WECEF, but ERISA rules now prevent that type of support for nonprofit foundations. Therefore, WECEF needs a source of dependable income in order to implement the initiatives listed above, as well as others yet to be determined by WECA members, successfully.

WECEF's Mission Is: To advance workforce development in the electrical industry through education and research.

In the future, the goal is to expand that mission to include community service so that merit shop organizations can participate in worthwhile charitable causes in a way that contributes to the communities we serve.

WECEF continues to seek and appreciate all types of donations including one-time donations, volunteering of time, and a variety of sponsorships for WECEF initiatives. However, your regular contributions/pledges can provide the stability of predictable cash flow, which is currently lacking, to set WECEF initiatives up for successful implementation.

If you have questions or suggestions about how WECEF can best accomplish its mission, please contact WECEF Director, Terry Seabury, <u>tseabury@goweca.com</u>.

Thank you for your continued support of WECEF!



Online Directory and Sign Listing Release Form

An important WECA membership benefit is a complimentary listing in our Online Membership Directory located on our website at <u>www.goweca.com</u>. We will list your company name, logo, a link to your company website, and a brief blurb about your company. In addition, we will display your company name and logo on a signboard or plaque at our headquarters/training facilities in any state you serve.

To take advantage of this opportunity to give your company visibility with the WECA community and industry, please submit the following information (electronic format only) to info@goweca.com:

- Company logo in high resolution (preferred formats are .eps, .ai or .tiff files)
- Company website address
- o Text (up to 80 words) for your personalized Directory listing message
- This signed release form

By signing below, you are acting as an authorized representative of your company to give WECA permission to display your company's name, location, logo and website link in the Online Member Directory and at WECA facilities.

Company Name: _____

Authorized Representative Signature:

Date:



Wage and Fringe Benefit Information

WECA Apprenticeship & Training Committee **Waiver and Release**

As a courtesy to our members, the WECA Apprenticeship & Training Committee provides general information about the wages and fringe benefits that WECA apprentices are to be paid while working on contracts covered by the Federal Davis Bacon Act and/or the California Prevailing Wage Law or otherwise subject to the payment of wages and fringe benefits for private work regulated under Section 208 of Title 8 of the California Code of Regulations. It must be understood, however, that it is the sole and exclusive legal responsibility of the employing Contractor to ascertain and pay the correct wages rates and fringe benefits.

There is important information that must be evaluated in determining the correct wage rates and fringe benefits to be paid apprentices. This information is in the possession of the employing Contractor or the employing Contractor can obtain such information, including, for example, the applicable bid date for deciding which wage determination to use, predetermined wage increases under state law, and coverage differences between Federal and State wage law. WECA is not in a position to obtain this information and cannot be responsible for gathering information for an employing Contractor.

Consequently, your participation in the WECA program is conditioned upon your acknowledgement and agreement of the following:

> 1. As the employing Contractor, you are solely and exclusively responsible for obtaining and paying the correct wages and fringe benefits to apprentices dispatched to you:

> 2. WECA is not legally responsible for providing you with accurate wage and fringe benefit information for employment of apprentices; and

> 3. As the employing Contractor, you waive and release WECA, its trustees, officers, employees, agents and representatives from any and all losses, damages or claims arising out of any wage or fringe benefit information WECA provides to you including any claims dealing with penalties, debarment or other direct or indirect losses or damages resulting from your noncompliance with federal, state or local law irrespective of California Civil Code Section 1542 which provides, "A general release does not extend to claims which the creditor does not know or suspect to exist in his favor at the time of executing the release, which if known by him must have materially affected his settlement with the debtor."

I have read the foregoing Waiver and Release, and based upon the consideration of my continued participation in the WECA program, I fully and voluntarily agree to its terms.

Company Name: _____

Authorized Representative Signature: _____ Date: _____