



MEMBERSHIP APPLICATION

Submit completed forms to: (email) Jessica Housdan, jessica@msgc.com or (mail) AGC of Mississippi, Attn: Membership, P.O. Box 12367, Jackson, MS 39236

COMPANY NAME _____ COMPANY PHONE _____ WEBSITE _____

MAILING ADDRESS _____ CITY _____ STATE _____ ZIP _____

PHYSICAL ADDRESS _____ CITY _____ STATE _____ ZIP _____

CONTACT PERSON #1 _____ TITLE _____ PHONE _____ EMAIL _____

CONTACT PERSON #2 _____ TITLE _____ PHONE _____ EMAIL _____

REFERRED BY _____ COMPANY _____ PHONE _____

How long has your company been in existence? 1 to 3 years Over 3 years

Does your company provide a 401k multi employer plan or retirement plan for employees? Yes No No, but interested

State General Contractor's License Number _____

Primary Construction or Business Type _____

Other construction types performed (mark all that apply):

Building Highway Heavy Industrial Utilities Infrastructure Railroad Foreign

Please briefly describe the scope of your work:

Member Type (mark one):

General Contractor Subcontractor Utility Infrastructure Road/Bridge Service/Supplier

*By providing the information above, I am agreeing to receive communication sent by or on behalf of AGC of Mississippi and the Associated General Contractors of America via mail, telephone, or email.

If you have questions, please contact Jessica Housdan at AGC of Mississippi. Call 601-981-1144 or email jessica@msgc.com.