



# Granite State Designers and Installers Association

*New Hampshire's Association of  
Septic System Professionals*

Join NOW in One of These Four Categories!

ACTIVE MEMBERS (Installer, designer or pumper state permitted or formerly permitted by State of NH)..... \$150

ASSOCIATE MEMBER (Installer, designer or pumper state permitted or formerly permitted by State of NH, employed by, in partnership with, or a corporate officer in a company currently represented by an active member)..... \$75

AFFILIATE MEMBER (Individuals not licensed as an installer, designer or pumper, but having an interest in the industry and the goals/purposes of the Association)..... \$100

PUBLIC SECTOR MEMBER (Individuals employed in governmental agencies, not state permitted, and/or not engaged in the design or installation of septic systems). ..... \$50

*JOINING BETWEEN JANUARY 1 AND MARCH 31: Full current fiscal year's dues are payable.*

*JOINING BETWEEN APRIL 1 AND JUNE 30: 75 percent of current year's dues are payable.*

*JOINING BETWEEN JULY 1 AND SEPTEMBER 30: 50 percent of current year's dues are payable.*

*JOINING BETWEEN OCTOBER 1 AND DECEMBER 31: Pay full current year's dues. Payment will qualify organization to receive balance of calendar year, and full upcoming calendar year for this single fee.*

*There shall be no proration of dues for associate and public sector members.*

## MEMBERSHIP APPLICATION

Send completed application form and appropriate dues to:

Granite State Designers and Installers Association, 53 Regional Drive, Suite 1, Concord, NH 03301

Please register me as a member of the Granite State Designers and Installers Association in the following membership category:

\_\_\_Active Member \_\_\_Associate Member \_\_\_Affiliate Member \_\_\_Public Sector Member

NOTE: Applicants for public sector membership must provide their title and the governmental agency; associate member applicants must provide name of active member(s) previously paid within your organization:

NAME \_\_\_\_\_

AFFILIATION (firm or agency) \_\_\_\_\_

MAILING ADDRESS \_\_\_\_\_

CITY/STATE/ZIP \_\_\_\_\_

TEL.# \_\_\_\_\_ FAX # \_\_\_\_\_ Email \_\_\_\_\_

LICENSE NUMBER(S) AS APPLICABLE:

DESIGNER \_\_\_\_\_ INSTALLER \_\_\_\_\_ PUMPER \_\_\_\_\_

(For Associate Members Only: List name of active member) \_\_\_\_\_