



**AUSTIN NARI**

## MEMBER APPLICATION

**For NARI office use only  
Processor – Kayvon Leath**

Date received at chapter \_\_\_\_\_ 20\_\_\_\_  
Determination date \_\_\_\_\_  
Approved Not Approved

**ELIGIBILITY** for NARI membership requires that applicants be actively engaged in the remodeling industry for at least 6 months prior to application; applicants must conduct their business in compliance with the NARI Code of Ethics.

Company Name: \_\_\_\_\_

Designated  
Representative: \_\_\_\_\_

Title: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_

Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_

Fax: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

E-mail: \_\_\_\_\_

Website \_\_\_\_\_

Sponsor: \_\_\_\_\_

**APPLICANT FACTS** *(for NARI use only; used in strict confidence)*

1. *What is your industry involvement?*

- ☐ Contractor
- ☐ Wholesaler/Supplier
- ☐ Lender
- ☐ Designer/Architect
- ☐ Utility
- ☐ Manufacturer
- ☐ Subcontractor
- ☐ Other (explain) \_\_\_\_\_

2. *Have you previously held NARI membership?*

☐ No ☐ Yes ☐ When? \_\_\_\_\_

3. *Date company was established:* \_\_\_\_\_

4. *Liability insurance company:* \_\_\_\_\_

*Policy #:* \_\_\_\_\_

### ACKNOWLEDGMENT

Please review this application to ensure that all information is complete and correct. Dues must accompany this application when returned to the NARI Chapter at the address below (Please retain a copy for your files). Application to the NARI Chapter grants the Chapter permission to conduct a check in compliance with the Texas Secretary of State. Chapter membership is accordingly provisional and subject to approval of the NARI Chapter Board of Directors

I have reviewed the information contained in this membership application and confirm that this information is correct to the best of my knowledge and attest that I am in compliance with the Code of Ethics printed on the back of this application, and agree to comply with the Bylaws and Code of Ethics of the Association in the future.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Note: NARI membership dues are not deductible as a charitable contribution but may be deductible as an ordinary business expense.

Chapter Dues/National Dues are \$ 775.00 annually which includes your logo on our website. You can mail a check or call 512-375-2601 with cc#. There is a 3% credit card fee. \$100 for logo upgrade on website.

Return this application with all fees and dues to: **AUSTIN NARI, P.O. Box 9964, Austin, Tx 78766 or email [kayvon@austinnari.org](mailto:kayvon@austinnari.org)**



## NARI Code of Ethics

Each member of the National Association of the Remodeling Industry agrees to comply with the NARI bylaws and is pledged to observe high standards of honesty, integrity and responsibility in the conduct of business:

- By promoting in good faith only those products and services which are known to be functionally and economically sound, and which are known to be consistent with objective standards of health and safety
- By making all advertising and sales promotion factually accurate, avoiding those practices which tend to mislead or deceive the customer
- By writing all contracts and warranties such that they comply with federal, state, and local laws
- By promptly acknowledging and taking appropriate action on all customer complaints
- By refraining from any act intended to restrain trade or suppress competition
- By attaining and retaining insurance as required by federal, state, and local authorities
- By attaining and retaining licensing and/or registration as required by federal, state, and local authorities

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Austin NARI communicates by Eblast & text messages. Please list everyone you would like to receive information:

**Email** Event Contact Information: \_\_\_\_\_ Opt Out Please

If you would like others in your company please include them below

**Text Message** Cell Phone Number: \_\_\_\_\_ Opt Out Please

If you would like others in your company please include them below

**Email** for Accounting Purposes: \_\_\_\_\_

How did you hear about our organization? \_\_\_\_\_

Did an Austin NARI member refer you? Yes or No      If Yes whom \_\_\_\_\_

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Would you like to be part of one or more committees? If so please circle

Tour of Remodeled Homes	W.I.N. (Women in Construction)	Contractor of the Year (CotY Awards)
Membership	Events – Golf & Clay Shoot	Workforce Development Speaker
General Membership Meetings (Speakers)		Government Affairs

Does your company have social media accounts that we can connect to? Please Circle

Houzz ~ Twitter ~ Facebook ~ Instagram ~ Pinterest

If you are a remodeler, builder, designer, or architect – Please fill out the information below.

The idea is to include everything that could define a potential customer that your company would be interested in taking a call from. You can determine on the call if the customer is a good fit for you.

1. All zip codes in your service area. (Include all areas you would be willing to field a call from.)
2. Minimum project value that would be of interest.
3. Maximum project value (if applicable).
4. Category of service(s) provided (circle all that apply):
  - a. Remodel\*
  - b. Addition
  - c. Outdoor Living Space (Outdoor Kitchen, Landscaping, Decks)\*
  - d. New build
  - e. Exterior Installation (Windows, Siding, Doors, Roofing)\*
  - f. Residential
  - g. Heavy Commercial
  - h. Light Commercial
  - i. Other – please specify in as much detail as possible
5. If Remodel above, please specify (circle all that apply):
  - a. Whole house
  - b. Kitchen
  - c. Bathroom
  - d. Other room(s)
  - e. Other - please specify in as much detail as possible
6. If Outdoor Living Spaces above, please specify (circle all that apply):
  - a. Outdoor kitchen
  - b. Landscaping
  - c. Decks
  - d. Other – please specify in as much detail as possible
7. If Exterior Installation above, please specify (circle all that apply):
  - a. Windows
  - b. Siding
  - c. Doors
  - d. Roofing
  - e. Other – please specify in as much detail as possible