



Home Builders Association of West Florida

MEMBERSHIP CHANGE FORM

Date: _____ Submitted by: _____
(Please print first & last name.)

Company name currently listed as: _____
(For our reference, please list the company name as it appears in the printed and online listing so that we may complete submitted changes.)

Change company name to: _____

Change primary contact name to: _____
(This name will be published as the primary contact in NAHB, listed in the printed directory and the online directory.)

Change address for flyers, Cornerstone, directory listing, website listing and NAHB to:

Address _____ City _____ ST _____ Zip _____

Is above address for billing? (Y / N) If no, list secondary address for billing only:

Address _____ City _____ ST _____ Zip _____

For the following, please select Published (P) or Non-Published (NP) by circling your preference. (Published on website & printed directory.)

Phone Number: _____ - _____ - _____ (P / NP)

Cell Number: _____ - _____ - _____ (P / NP)

Fax Number: _____ - _____ - _____ (P / NP)

Email: _____ (P / NP)

Company Website: _____ (P / NP)

Preferred contact method:
(Place an X next to your choice.)

____ Email ____ Fax

____ Postal Mail ____ All

Your company may choose up to three (3) categories to be listed under in the Find Member Services section on the homepage of www.westfloridabuilders.com.

Please view the categories on the website and list your three choices below.

Category 1: _____

Category 2: _____

Category 3: _____

Additional category listings can be purchased at the rate of \$5.00 per category. Use page two of this form to submit additional category choices and payment information.

I understand that by providing the information above and signing this application on behalf of my company/organization, I consent to receive faxes, emails and telephone calls from the Home Builders Association of West Florida and NAHB.

Signature of person submitting changes: _____

**Complete form and submit to: HBA of West Florida
4400 Bayou Boulevard, Suite #45
Pensacola, FL 32503**

Forms may be submitted by fax to: 850-494-9767 or email to Kelly@hbawf.com



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Additional Category Listing & Payment Information

My company would like to listed under additional categories in the Find Member Serves section of www.westfloridabuilders.com.

Company name: _____

Additional categories requested:

Category 4: _____ (\$5.00 Fee applies)

Category 5: _____ (\$5.00 Fee applies)

Category 6: _____ (\$5.00 Fee applies)

Category 7: _____ (\$5.00 Fee applies)

Category 8: _____ (\$5.00 Fee applies)

Category 9: _____ (\$5.00 Fee applies)

Category 10: _____ (\$5.00 Fee applies)

We try to maintain the integrity of our Member Services list, so that interested viewers can easily find services provided by HBA members. If you feel your company offers a product or service that is not reflected by any of the current categories, please submit a category request below. We review all submitted requests but cannot guarantee the category will be added.

Requested category: _____

Payment Information:

Check # _____ (A check is attached.)

Please charge my credit card in the amount of \$ _____.

_____ Visa _____ Mastercard

CRV # _____
(3 or 4 digit security code.)

Card Number _____ Expiration Date: _____

Signature authorizing charges: _____

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