

Remodelers Council Application

Name: _____

Company: _____

Address: _____

City, State, Zip: _____

Business Phone: _____ Fax: _____

Email: _____

Type of membership requested: Remodeler Associate

Who can we thank for having you join RMC?

Please check boxes:

- \$65 Annual Remodelers Council dues (Mandatory)
- \$10 Voluntary donation to FHBA Remodelers Council
- \$0.99 Donation to Mid-FL Home Builders Foundation

Method of Payment:

- Enclosed is my check Charge my credit card

Total Amount: \$ _____ Signature _____

Acct #: _____ Exp. Date _____ Sec. Code _____

Billing Address: _____ Zip: _____

Membership to the HBA of Metro Orlando Remodelers Council is on an individual basis and is non-transferable.



Send completed applications to
HBA of Metro Orlando
Attn: Ali Gorgone
544 Mayo Avenue Maitland, FL 32751
Phone: 407-691-2186
Fax: 407-629-7321
Ali@HBAofMetroOrlando.com