

Name (ILI Representative)

Company

1502 I Street Suite 400 Stone City Bank Building Bedford, IN 47421 812.275.4426 voice 812.279.8682 fax www.iliai.com

## **Associate Member Application**

We hereby apply for membership in the Indiana Limestone Institute of America, Inc., and upon confirmation, be governed by the provisions for "Associate Members" in the By-Laws of this institute.

Address		
City	State	Zip
Phone	Fax	
Web	E-Mail	
Questionnaire (All information remains confidential)		
List your supplier(s) of Indiana Limestone:		
List three recent projects using Indiana Limestone: (Name	, Location, Ai	rchitect, Mason)
List any other materials you fabricate or sell:		
Included with this application you will find our check for \$ annual dues as established by the Indiana Limestone Insti		
<b>NOTE:</b> If your membership application is not able to be c payment will be refunded in full.	confirmed by	the ILI's board of directors, your
As an officer in this company, I hereby attest and confirm Limestone, but provides goods and/or services to the indumenbership level.		
Applicant Signature:		se Only!!!
Title:	Con	firmed By: Title:
Date:		Date: