

FGIA Corporate Membership Application

In submitting this application, we agree to abide by the FGIA [Bylaws](#) and to promote the objectives of FGIA.

Company Information

Company: _____ Business Website: _____
 Address: _____ City/State/Zip: _____ Country: _____
 Main Phone: _____ Fax: _____ Toll Free: _____ General Email: _____
 Company Description to be used in online member directory: _____

Main Contact

Name: _____ Title: _____ Email: _____
 Address: _____ City/State/Zip: _____ Country: _____
 Office Phone: _____ Cell Phone: _____ Fax: _____

(List any additional contacts that you would like to be included in the membership in the space provided on page 4.)

Additional Information

Was there a current FGIA member(s) who was influential in your decision to pursue an FGIA Membership? If so, please list below.

Name: _____ Company: _____ Title: _____

Participation Level

Review the [FGIA Dues Schedule](#) prior to making Participation Level selections.

☐ CATEGORY 1 MEMBERSHIP*

- | | | |
|---|----------------------------------|--|
| <input type="checkbox"/> Residential Products Council (RPC) | <input type="checkbox"/> Primary | Product Interests Available with RPC or APC: |
| <input type="checkbox"/> Architectural Products Council (APC) | <input type="checkbox"/> Primary | |
| | | <input type="checkbox"/> Door <input type="checkbox"/> Skylight/Sloped Glazing <input type="checkbox"/> Wall Interface |

If selecting both Residential and Architectural Products Councils, a \$500 fee applies (please indicate which is your company's primary market).

Material Market Involvement:

- ☐ Aluminum ☐ Fiberglass ☐ Vinyl ☐ Wood & Cellulosic Composites

Regional Involvement (may choose both regions): ☐ [Southeast](#) ☐ [Western](#)

FGIA Fenestration and Glazing Virtual Library (FGVL)

- ☐ [The FGVL](#), which provides online, read-only access to all AAMA (Category 1 membership) technical publications for all company employees is included at no additional cost. By checking this box, I agree to the terms of the [FGVL License Agreement](#). To upgrade the FGVL subscription to allow document printing, please complete and submit the [FGVL Upgrade Form](#).

☐ CATEGORY 2 MEMBERSHIP (\$75 million maximum annual sales volume)

Regional Involvement (must choose at least one region): ☐ [Southeast](#) ☐ [Western](#)

☐ CATEGORY 3 MEMBERSHIP (\$50 million maximum annual sales volume)

Must choose only one region: ☐ [Southeast](#) ☐ [Western](#)

☐ GLASS PRODUCTS COUNCIL (GPC) MEMBERSHIP* (May be added to Category 1, 2 or 3 membership or selected on its own.)

- ☐ IG or Fenestration Producer ☐ IG Component Producer ☐ Primary Glass Producer ☐ Auditing or Testing Agency

FGIA Fenestration and Glazing Virtual Library (FGVL)

- ☐ [The FGVL](#), which provides online, read-only access to all IGMA (GPC membership) technical publications for all company employees is included at no additional cost. By checking this box, I agree to the terms of the [FGVL License Agreement](#). To upgrade the FGVL subscription to allow document printing, please complete and submit the [FGVL Upgrade Form](#).

☐ FENBC REGION MEMBERSHIP* (May be added to Category 1, 2, 3 or GPC membership or selected on its own.)

Must select company classification:

- ☐ Lab Member (includes auditing and testing agencies) - \$385 CAD (\$290 USD)
☐ Energy Advisor - \$385 CAD (\$290 USD)
☐ Regular Member - \$1,320 CAD (\$1,000 USD)
☐ Supplier Member - \$1,650 CAD (\$1,250 USD)

* See page 3 for information regarding Council voting rights.

Subsidiary Company

List any subsidiary companies to be included in the membership. *(Please list additional subsidiary companies in the space provided on page 4.)*
Sales volume of each subsidiary is included in the reported figure *(see page 2)* for calculation of dues.

Brand Recognition Option: ☐ Brand Recognition (\$1,500 one-time set-up fee) ☐ None

Company: _____ Business Website: _____

Address: _____ City/State/Zip: _____ Country: _____

Main Phone: _____ Fax: _____ Toll Free: _____ General Email: _____

Company Description to be used in member directory: _____

Required Data for Dues Calculation

This section is required and must be completed by a Corporate Officer. (THIS INFORMATION IS KEPT STRICTLY CONFIDENTIAL.)

I, _____ (corporate officer name and title),
confirm that the following data represents the preceding year's figures for the companies being included in our FGIA membership.

Signature: _____ Date: _____

Category 1, 2 or 3 Membership

North American sales volume for products or services related to residential and commercial windows, doors, curtain walls, storefronts, sloped glazing, skylights, sunrooms and/or related components: \$ _____ (in USD)

Glass Product Council Membership

IG or Fenestration Producer – North American insulating glass production or usage volume for all plants: _____ (in square feet)

IG Component Producer – North American sales volume for all insulating glass-related products/services: \$ _____ (in USD)

Dues Calculation

See the [FGIA Dues Schedule](#) to determine all applicable dues fees.

Category 1, 2 or 3 Membership Dues..... \$ _____

Support of Architectural and Residential Products Councils *(only for Category 1 with support of both – add \$500)* \$ _____

Glass Products Council Membership *(GPC only or added to Category 1, 2 or 3 membership)* \$ _____

FENBC Membership *(FENBC only or added to Category 1, 2, 3, or GPC membership)* \$ _____

ANNUAL MEMBERSHIP DUES AMOUNT.....\$ _____

PRO-RATED MEMBERSHIP DUES TOTAL\$ _____

(Annual Membership Dues ÷ 12) x Number of months left in year including current month.

Required Glass Products Council Research & Development Fee *(applies only to GPC membership – add \$200)* \$ _____

Subsidiary Brand Recognition Fee *(Number of subsidiaries x \$1,500 one-time set-up fee)*..... \$ _____

Optional Contribution to FGIA Lobbying Activities \$ _____

Optional Contribution to FGIA Research Projects \$ _____

TOTAL PRO-RATED MEMBERSHIP DUES PLUS ADDITIONAL FEES/CONTRIBUTIONS..... \$ _____

FGIA anticipates that 2% of our total membership dues will support lobbying activities so, per the U.S. Omnibus Budget Reconciliation Act of 1993, 2% (i.e., \$20 per \$1,000) of your dues contribution for the current year is not tax deductible.

Payment of membership dues is a binding agreement for the period covered by this membership application.

Payments or contributions to FGIA may be deductible as a business expense but are **not** deductible as charitable contributions for income tax purposes.

Dues Billing Contact

☐ **Main Contact** *(contact provided on page 1 of this application)*

☐ **Accounts Payable/Other** *(please provide all contact information below)*

Name: _____ Title: _____ Email: _____

Address: _____ City/State/Zip: _____ Country: _____

Office Phone: _____ Cell Phone: _____ Fax: _____

Payment Information

☐ Companies located outside of North America must include the **Non-North American Company Application Processing Fee** of **\$2,500** in the total entered below. This is a one-time application processing fee which covers the continuous life of the membership.

Total Amount Due: \$ _____

Please select your preferred payment method:

☐ Check – payable to “FGIA” in U.S. dollars ☐ Wire transfer ☐ Direct Debit / ACH / EFT
☐ VISA ☐ MasterCard ☐ Amex ☐ Discover Acct # _____ CVV Code _____ Exp. Date _____

Cardholder (please print): _____ **Signature:** _____

(Effective 1/1/2021, a 3% processing fee will be applied to all invoices to be paid by credit card except where prohibited.)

Membership is activated upon receipt of completed application and dues payment.

Council Voting Criteria – Applies only to Category 1 and Glass Products Council Memberships

Based on the Participation Level and Council support selected on page one, please indicate your voting rights interest below by placing an X in the appropriate box(es) and providing an applicable description supporting the eligibility selection(s) you’ve made.

COUNCIL	NON-VOTING	VOTING	VOTING ELIGIBILITY CRITERIA					
			Is a finished fenestration product manufacturer	Makes a product that is directly addressed by the Council	Makes a product that is incorporated into a product directly addressed by the Council	Makes a product that is used to install a product addressed by the Council	Offers a service that is used by companies making products directly related to the products addressed by the Council or incorporated into such products	Provides equipment used in the manufacture of products that are directly addressed by the Council or incorporated into such products
Architectural Products Council	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Residential Products Council	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Glass Products Council	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Door Council	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Skylight/Sloped Glazing Council	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Wall Interface Council	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Aluminum Material Council	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fiberglass Material Council	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Vinyl Material Council	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Wood and Cellulosic Composite Material Council	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Company Description Supporting Council Voting Eligibility

Additional Contacts

Name: _____ Title: _____ Email: _____
 Address: _____ City/State/Zip: _____ Country: _____
 Office Phone: _____ Cell Phone: _____ Fax: _____
 If this is a contact for a Subsidiary company, enter the company name: _____

Name: _____ Title: _____ Email: _____
 Address: _____ City/State/Zip: _____ Country: _____
 Office Phone: _____ Cell Phone: _____ Fax: _____
 If this is a contact for a Subsidiary company, enter the company name: _____

Name: _____ Title: _____ Email: _____
 Address: _____ City/State/Zip: _____ Country: _____
 Office Phone: _____ Cell Phone: _____ Fax: _____
 If this is a contact for a Subsidiary company, enter the company name: _____

Name: _____ Title: _____ Email: _____
 Address: _____ City/State/Zip: _____ Country: _____
 Office Phone: _____ Cell Phone: _____ Fax: _____
 If this is a contact for a Subsidiary company, enter the company name: _____

Name: _____ Title: _____ Email: _____
 Address: _____ City/State/Zip: _____ Country: _____
 Office Phone: _____ Cell Phone: _____ Fax: _____
 If this is a contact for a Subsidiary company, enter the company name: _____

Name: _____ Title: _____ Email: _____
 Address: _____ City/State/Zip: _____ Country: _____
 Office Phone: _____ Cell Phone: _____ Fax: _____
 If this is a contact for a Subsidiary company, enter the company name: _____

Additional Subsidiary Companies

Sales volume of each subsidiary is included in the reported figure (*see page 2*) for calculation of dues.

Brand Recognition Option: ☐ Brand Recognition (\$1,500 one-time set-up fee) ☐ None

Company: _____ Business Website: _____
 Address: _____ City/State/Zip: _____ Country: _____
 Main Phone: _____ Fax: _____ Toll Free: _____ General Email: _____
 Company Description to be used in member directory: _____

Brand Recognition Option: ☐ Brand Recognition (\$1,500 one-time set-up fee) ☐ None

Company: _____ Business Website: _____
 Address: _____ City/State/Zip: _____ Country: _____
 Main Phone: _____ Fax: _____ Toll Free: _____ General Email: _____
 Company Description to be used in member directory: _____

**PLEASE MAIL, FAX, OR EMAIL THIS COMPLETED MEMBERSHIP APPLICATION TO: FGIA, Attn: Membership Department,
 1900 E. Golf Rd, Suite 1250, Schaumburg, IL 60173 or FAX to (847) 303-5774 or EMAIL to application@fgiaonline.org**