



YEARLY MEMBERSHIP FEE \$100

Membership applications can be emailed to info@mdecia.org

mailed to 3108 ½ Texas Baltimore MD 21234

Or brought to the monthly meeting.

Cash, Check or to pay with a credit card please call the office 410-486-3549

FULL NAME	
MAILING ADDRESS	
PHONE NUMBER	
EMAIL ADDRESS	
EMPLOYER/COMPANY NAME	
BEST WAY TO CONTACT YOU	

TYPE OF MEMBERSHIP	FULL	ASSOCIATE	RENEWAL
STATE LICENSE NUMBER			
OTHER REGISTRATION NUMBER			
HOW MANY YEARS WITHIN THE TRADE			

PLEASE PROVIDE TWO REFERENCES WITHIN THE ELECTRICAL FIELD	
NAME	NAME
PHONE NUMBER	PHONE NUMBER
EMPLOYER/COMPANY	EMPLOYER/COMPANY

SIGNATURE _____ DATE _____

OFFICE USE ONLY: