

*Are you looking for ways
to help your bottom line?*

Invest in the future of your business and industry -

*Don't miss the **Membership Benefits Discussion!***

**In order to make this a
small and informal
relationship-building event,
attendance is limited to only
20 ABC members.
RSVP today!**

Tuesday, March 23, 2010

at 6:00 p.m.

**ABC of Western Pennsylvania
Chapter Office**

*This is your chance to learn about everything
ABC offers exclusively to our members!*

- Learn about all your chances to network with the **best** contractors, suppliers, and associates in the western Pennsylvania market!
- Discover all the member services available to you, including safety programs, member discounts, and more!
- Find out how to be active in one of our committees to build strong relations through our extensive network!
- Meet members of your Board of Directors and learn how the leadership can help *you!*

Sponsored by:

*Membership Committee
Chairman Bob Fitzgerald of
BRIDGES & Company and the
Membership Committee!*

***This invitation is for ALL members -
whether you are new or have been
with the ABC family for years!***

***Just fill out the registration form on the
opposite side of this flyer!***

Associated Builders and Contractors of Western Pennsylvania



Event Registration Form

Western
Pennsylvania
Chapter

Event Title: Membership Orientation

Event Date & Time: March 23, 2010 at 6:00 p.m.

All registration forms must be received at least one week prior to event date. We are unable to reimburse for cancellations after that date.

Company Information

Company: _____
Company Phone Number: (____) _____ - _____
Company Fax Number: (____) _____ - _____
Company Contact: _____
Contact E-mail Address: _____

Registrant Information

Name	E-mail Address	<small>Please provide an E-mail address for each individual registrant.</small>
1. _____	_____	
2. _____	_____	

Payment Information

Price per Registrant: \$ _____ X Number of Registrants _____ Total amount due: \$ _____

How would you like to pay?

- Check
Check payments may be mailed to: ABC of Western PA, Attention: Allison, 3500 Spring Garden Avenue, Pgh., PA 15212
- Credit Card
 - Visa
 - Master Card

Card Number: _____ - _____ - _____ Expiration Date: ____/____/____

Card Holder Signature: _____

Credit card payment may be mailed to 412-381-3201 (Attn: Allison) or E-mailed to ahouser@abcwpa.org

**No Cost for
this event!**