

TACC

TENNESSEE ASSOCIATION OF CONSTRUCTION COUNSEL, INC.

APPLICATION FOR MEMBERSHIP

Date: _____ Tennessee BPR No. _____

Name: _____

Firm Name: _____

Firm Address: _____

Firm Telephone: (____) _____ Fax: (____) _____

E-Mail: _____ Website: _____

Home Address: _____

Home Telephone: (____) _____ E-Mail: _____

Undergraduate School: _____ Year: _____

Law School: _____ Year: _____

Year Admitted to Practice in Tennessee: _____

Construction Related Education and/or Experience (Optional): _____

Please forward completed application, along with your annual membership dues check in the amount of \$250.00 made payable to:
Tennessee Association of Construction Counsel, Inc.

P.O. Box 198615
Nashville, TN 37219
(615) 259-1356