

# ECHL

**ELECTRICAL CLEARING HOUSE OF LOUISVILLE**

**Organized in 1912**

[www.echlky.com](http://www.echlky.com)

## Application for Membership

I hereby make an application for membership into the Electrical Clearing House of Louisvil Date: \_\_\_\_\_

\_\_\_\_\_  
First Name M.I. Last Name Birth Date: Month / Day / Year

\_\_\_\_\_  
Home Address City State Zip Code

\_\_\_\_\_  
Contact Phone # Email Address

Organization: IEC ☐ ABC ☐ IBEW ☐ NECA ☐ N/A ☐ Other: \_\_\_\_\_

Member Type:

Contractor ☐ Supplier ☐ Inspector ☐ Fire Prevention ☐

Electrician ☐ Utility ☐ Maintenance ☐ Other ☐

Please check all that apply.

License Number: EE: \_\_\_\_\_ ME \_\_\_\_\_ CE \_\_\_\_\_

\_\_\_\_\_  
Place of Employment

\_\_\_\_\_  
Employer Address City State Zip Code

\_\_\_\_\_  
Employer Phone Employer Email Address

I agree to abide by the Constitution, By-Laws and Rules of the Clearing House

\_\_\_\_\_  
Signature

***Annual Membership Dues are \$60.00***

**Payable with application and renewed every September**

Make checks payable to:

**Electrical Clearing House of Louisville  
P.O. Box 2085  
Clarksville, Indiana 47129**

[info@echlky.com](mailto:info@echlky.com)