



**National Service Alliance  
Membership Enrollment Form**

**Company Name:** \_\_\_\_\_  
Physical Address: \_\_\_\_\_  
City: \_\_\_\_\_ ST: \_\_\_\_\_ Zip: \_\_\_\_\_  
Mailing Address(if different) \_\_\_\_\_  
Phone Number: \_\_\_\_\_ Fed. Tax ID: \_\_\_\_\_  
Email Address: \_\_\_\_\_ Year Established: \_\_\_\_\_

Owner(s) of Company: \_\_\_\_\_

Primary Contact (Will receive all notifications - can be same as above): \_\_\_\_\_

Primary Contact email: \_\_\_\_\_

Are you MWBE \_\_\_\_\_ SDB \_\_\_\_\_ Other \_\_\_\_\_ Certification #: \_\_\_\_\_  
Do you operate as: An Individual \_\_\_\_\_ Corporation \_\_\_\_\_ Partnership \_\_\_\_\_  
Other \_\_\_\_\_ Explain \_\_\_\_\_

A. If a Corporation, in what state(s) or province(s) are you incorporated?  
\_\_\_\_\_

B. List names of all partners or owners, titles and year of experience in the contract cleaning industry:  
\_\_\_\_\_  
\_\_\_\_\_

**Employee Information:**

Number of office employees at Corporate Headquarters \_\_\_\_\_ Total employees in company \_\_\_\_\_

Percentage full time \_\_\_\_\_ % Part time \_\_\_\_\_ % Management/Employee Ratio: \_\_\_\_\_

List all branch locations (Cities, States or markets) you currently operate in. \_\_\_\_\_

List all subsidiaries/franchisees including names and contacts (A separate sheet may be attached)  
\_\_\_\_\_  
\_\_\_\_\_

Current Distributors: \_\_\_\_\_

Gross Annual Sales of contractors total company operation from previous 3 calendar years: (Required)

2024 \_\_\_\_\_ 2023 \_\_\_\_\_ 2022 \_\_\_\_\_

Avg. Annual Janitorial Supply Spend: (Required) \_\_\_\_\_

What percentage of your company is subcontracted? \_\_\_\_\_ % (Required)

Are you a Member of BSCAI? \_\_\_\_\_ Yes \_\_\_\_\_ No  
Are you willing to sign a Group Purchasing Agreement? \_\_\_\_\_ Yes \_\_\_\_\_ No

**Thank you for your interest in the NSA. After review and acceptance of this application, the NSA agreements and material will be sent for your review.**

Prepared By: \_\_\_\_\_ Title: \_\_\_\_\_

Signature of Corporate Officer: \_\_\_\_\_ Date: \_\_\_\_\_