



**The Ohio Steel Association**  
Build with Steel

400 W Wilson Bridge Rd., Ste 120  
Worthington, OH 43085  
PH: 614-228-4716 | FX: 614-221-1989  
[osa@assnoffices.com](mailto:osa@assnoffices.com)  
[www.ohiosteelassn.org](http://www.ohiosteelassn.org)

## Ohio Steel Association 2026 Membership Application

Firm Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Company Website Address: \_\_\_\_\_

Contact person & Email address: \_\_\_\_\_

Application Submission Date: \_\_\_\_\_

**TYPE OF MEMBERSHIP**     **Fabricator**     **Associate**     **Architects and Engineers**

**Fabricator Membership \$600.** Any person’s firm or corporation, at the time, engaged in the fabrication of structural steel or architectural metal products in the state of Ohio. Firm must have a majority interest or is engaged in the fabrication of structural steel or architectural metal products.

**Associate Membership \$1,200.** Any person’s firm or corporation engaged 1) in the manufacture of products, equipment, machinery or other facilities generally used in the fabrication of structural steel or architectural metal products or 2) engaged in the production and sale of the plain material used in the fabrication of structural steel or architectural metal products or 3) would contribute to the general improvement of the business of managing, detailing, fabricating, selling and erecting of structural steel and allied metal products.

**Architects and Engineers – No Fee.** Any member of a firm engaged in practice as an architect or engineer, who shall be engaged in teaching any of these professions in a recognized school, college or university.

**Please return completed application, via fax, to 614-221-1989 or email to [osa@assnoffices.com](mailto:osa@assnoffices.com). Membership acceptance is contingent upon approval by the OSA Board of Directors.**

List all locations of production facilities, division and related subsidiaries that are actively engaged in the fabrication of structural steel and/or architectural metals.

**Plant Location/Corporation** \_\_\_\_\_

**City, State:** \_\_\_\_\_

**Plant Location/Corporation** \_\_\_\_\_

**City, State:** \_\_\_\_\_

**Others:** \_\_\_\_\_

Please type 'yes' or 'no' in each of the text boxes below.

**Note: Membership is not predicated on "YES" responses to any of the following questions.**

Do you fabricate structural steel? \_\_\_\_\_

Do you fabricate bridges? \_\_\_\_\_

Do you fabricate and/or manufacture architectural metals? \_\_\_\_\_

Do you provide engineering or legal services? \_\_\_\_\_

Do you provide drafting, detailing or design services? \_\_\_\_\_

Is your fabricating facility certified under AISC's Quality Certification Program? \_\_\_\_\_

Does your company erect structural steel and or/architectural metals? \_\_\_\_\_

Is your company in the steel service center business? \_\_\_\_\_

Does your company manufacture a product for the steel industry? \_\_\_\_\_

Does your company train, teach or educate for the steel industry? \_\_\_\_\_

How many years has your company been in business? \_\_\_\_\_

List three recent projects your firm has participated in the structural steel and/or architectural metals industry.

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

Name of OSA Active Member familiar with your operations: \_\_\_\_\_

The undersigned is engaged in the fabrication of structural steel and or architectural metals within the state of Ohio and hereby makes application for election to membership in the Ohio Steel Association, as provided by its by-laws.

The undersigned agrees that if duly elected to such membership, it will at all times during the period in which the undersigned shall remain a member of said Association, abide by the terms of said Association's certification of incorporation and of its by-laws, together with all lawful resolutions at any time or from time to time adopted by the members of said Association or by its Board of Directors or by its Executive Committee, and which shall be in fore and affect with respect the undersigned.

Primary Members Signature \_\_\_\_\_ Date: \_\_\_\_\_

Print Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Print Title: \_\_\_\_\_ Fax: \_\_\_\_\_

Email Address: \_\_\_\_\_

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**Please Print** the names of those employees you wish to have listed in our membership roster. (If your company is approved for membership.)

Name: \_\_\_\_\_

Title: \_\_\_\_\_ Email: \_\_\_\_\_

Name: \_\_\_\_\_

Title: \_\_\_\_\_ Email: \_\_\_\_\_

Name: \_\_\_\_\_

Title: \_\_\_\_\_ Email: \_\_\_\_\_