

## WEDA New Membership Application

Yes, I would like to join other WEDA members in supporting Wyoming's economy!

Primary Member \_\_\_\_\_

Organization /Firm: \_\_\_\_\_

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

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

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

City, State, Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_

Fax: \_\_\_\_\_

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

Web Site: \_\_\_\_\_

### **Unlimited Additional Memberships (at only \$75 each and all the same benefits!)**

Secondary Additional Member: \_\_\_\_\_

Organization /Firm: \_\_\_\_\_

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

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

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

City, State, Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_

Fax: \_\_\_\_\_

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

Once a primary member joins WEDA from your organization, you can have additional secondary members within your same organization join for a special rate of only \$75. This makes your dues dollars go much farther and returns significantly more to your organization. After completing this application, please mail/scan/fax it along with your dues payment to the WEDA office at:

WEDA  
263 N 8th Street  
Lander, WY 82520

info@wyomingeda.org  
307-332-5546  
fax 307-332-5336  
www.wyomingeda.org

## Credit Card Info

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Card Number: \_\_\_\_\_

Expiration Date: \_\_\_\_\_ 3-digit security code on back: \_\_\_\_\_

Street #/PO Box for this card: \_\_\_\_\_ Zip code for this card: \_\_\_\_\_

Signature on card: \_\_\_\_\_

Printed name on card: \_\_\_\_\_ Home phone: \_\_\_\_\_