



WSBA™

Premier Membership *Application*

Please print this application form, complete all fields and return with a check or money order for annual Premier Membership in the amount of \$100, made payable to WSBA. Please mail the printed form and payment to: WSBA, 248 Allison Ave., Pittsburgh, PA 15202. Email smiller@wsba.ws with any questions.

Company Name: _____

Your Name: _____

Birth Date: _____

Your Position: _____

Business Address: _____

Business Phone: _____

Cell Phone: _____

Email: _____

Web Address: _____

Company Description & Services Provided: _____

Signature: _____ Date: _____

This notice applies to all information collected or submitted on the WSBA websites, through email correspondence, live chat sessions, postal mail service, facsimile or telephone. All information supplied by You is used exclusively by WSBA for the purposes of fulfilling Your requests or to communicate information about WSBA services or products. By communicating with Us, You are consenting to receive communications from Us. It is further understood that all agreements, notices, disclosures and other communications that We provide to You, or You provide to Us electronically satisfy any legal requirement that such communication be in writing.

Thank you for your membership!

www.wsba.ws