

Membership Application

\$85 Regular Annual Membership
\$45 Associate Annual Membership
\$100 Sustaining Annual Membership
\$25 Student Annual Membership

☐ Business Address	•		ollowing locations:	
This application is for a:				
☐ Renewal		ew Member	Today's Date:	
Name:				
Business Title:				
Company Name:				
Business Address:				
City				
Home Address:				
City				
Business Telephone:				
Home Telephone:				
E-mail:				
Fax Number:				
Credit Card payments:	VISA	☐ MasterCard	☐ AmEx	
Account #:			_ Expiration Date:	
Signature				

Please mail checks to: WAAI

P.O. Box 2535, Birmingham, MI 48012. For more information call **248.646.5250**

You can fax this application to: 248.646.6721.