



MEMBERSHIP RENEWAL / APPLICATION

Post Office Box 1131 • Wausau, WI 54402-1131 • info@wausauwestside.com • www.wausauwestside.com

Date of Application: _____

Total number of employees at present time:

Based on this number, using the following rate list, please indicate dues payable amount. Make your check payable to WWSBA - P. O. Box 1131 - Wausau, WI 54402-1131.

Number of Employees	Annual Dues	Dues Payable/Paid
1 to 5	\$ 45.00	\$
6 to 30	\$ 60.00	
31 to 50	\$ 95.00	
51 & Over	\$135.00	
Non-profit	\$ 35.00	
Individuals	\$ 25.00	

Your paid membership entitles you to one free listing on our website. Please complete the following so we reflect your business details correctly.

Listing Heading (restaurant, financial service, attorney, etc.):

Business Name: _____

Representative: _____

Address: _____

City: _____ Phone: _____

Website: _____

Yes, send electronic notices to these e-mails: _____

Company Bio: (Feel free to continue on the back of this page!)
