

WFIA Membership Application & Dues Chart



MEMBER SIGNATURE _____
DATE _____

Corporate Name (PLEASE PRINT)		Number of Stores	
Street Address	City	State	Zip
Business Telephone		Business FAX	
PRINCIPAL Contact Name		PRINCIPAL Job Title	
PRINCIPAL Email Address		PRINCIPAL Mobile Phone	
BILLING Contact Name		BILLING Job Title	
BILLING Email Address		BILLING Contact Phone	
BILLING Address (if Different)	City	State	Zip

YOUR ANNUAL DUES INVESTMENT		
<u>Grocery Retail: Dues</u>		
Grocery Stores		\$270 per store
Convenience/Specialty Stores		\$135 per store
Coffee Houses		\$ 75 per store
<u>Grocery Non-Retail: Dues</u>		
		<u>Annual WA Sales</u>
Large Companies	\$3,500.00	Over \$20 Million
Medium Companies	\$1,185.00	\$5 to \$20 Million
Small Companies	\$ 595.00	\$3 to \$5 Million
Entrepreneurial Co.	\$ 295.00	Up to \$3 Million
<u>Associate Member – Business Services: Dues</u>		
Regional/National Company		\$885.00
Small Company		\$595.00

NOTE: Dues are based on a calendar year. If you are joining the WFIA in a month other than January, please pro-rate your payment on a rate of 8.33% per each month in which you will be a member. We will automatically invoice you for a full-year's renewal upon the new calendar year. Thank you for your support of the WA Food Industry Association. We look forward to working with you to protect and promote the independent grocery industry.

Membership Category: _____	Type of Business: _____
Please Describe Your Business: _____	
Preferred method(s) of contact for BILLING? Please check all that apply: <input type="checkbox"/> Email <input type="checkbox"/> FAX <input type="checkbox"/> Postal Mail For WFIA Communications, Action Alerts & Networking Events, may we email you? <input type="checkbox"/> YES <input type="checkbox"/> NO	