



WeBA Membership Application Form

Get Connected . . . Join Today!

Public Contact– to be used for public listings:

| | |
|---------------|---|
| Company Name: | Address: |
| City: | Postal Code: Phone: |
| Email: | Website: |

Membership Contact Person – to be used for information purposes:

| | | |
|-------|--------|--------|
| Name: | Email: | Phone: |
|-------|--------|--------|

Private Contact - to be used for account purposes only if Membership contact unavailable and is not shared.

| | | |
|---|------------------------|--------|
| Owner Name/Supervisor: | Email: | Phone: |
| # of Employees: | Year Business Started: | |
| Business Clarification (short description): | | |

Direct Membership information, including renewals will be sent directly to above Membership contact person. Other WeBA information such as our Events and General Updates may be posted in Newsletter, Website and various Social Media including Facebook and Twitter. This information is not exclusive to the Membership contact and to derive maximum benefit from Membership we encourage sharing WeBA notices with your sales team, customer service reps and in fact throughout your organization. Please encourage your colleagues to sign-up for our Newsletter, and /or please add your direct reports here and we will contact them on your behalf:

Who else should we send notices to within your company?

| | | |
|--------|--------|--------|
| Name: | Name: | Name: |
| Email: | Email: | Email: |

How did you hear about WeBA? :

| | |
|-------------------------------|-------------|
| WeBA Member (please specify): | WeBA Event: |
| Other: | |

PAYMENT INFORMATION

Yearly Membership Fee = \$ 275.00 + GST (GST # 12227 5894)

Note: Credit Card information will be shredded after processing. Unless you would like to have your WeBA membership place on auto renew where we will have your credit card details secured by password.

| |
|---|
| <input type="radio"/> Cheque <input type="radio"/> Cash or Credit Card #: |
| <input type="radio"/> Visa <input type="radio"/> M/C Expiry Date(MM/DD/YY): |
| Name on Card: |
| Authorizing Signature: |

AUTHORIZATION to include my business information on the WeBA website and membership listings.

YES NO Signature: _____

AUTHORIZATION please place my membership on auto-renewal, using the supplied Credit Card:

YES NO Signature: _____

NOTE: WeBA has an official privacy policy and it adheres to both the Canadian and Province of Alberta Privacy Commissions.

To review our complete privacy policy please visit our website at www.WeBA.org