



Wheatland Business Association

2010 Wheatland Business Association Membership Form

Business Name: _____

Address: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Contact Person(s): _____

Phone Number: _____ Fax: _____

E-mail Address: _____

Web Site Address: _____

Our preferred method to stay in contact with members regarding meetings and other projects is through **e-mail**; however, if you prefer to be contacted a different way, please note below:

E-mail Postal Mail Fax

Please let us know how you would like your business to be listed in the business directory and on other association sponsored promotional pieces:

Name: _____

Description of Business: _____

Signature: _____ Date: _____

PAYMENT (check or cash)

Calendar Year 2010 Membership Dues: \$20.00

2010 Wheatland City Services and Business Guide Sponsor: \$25.00 (membership required)

Please mail this completed form with payment by **January 25, 2010** to: Wheatland Business Association, P.O. Box 27, Wheatland, IA 52777. You may also hand-deliver this form and payment to Tracy at ECI Insurance or Aaron at Technology Solutions.