

## **MEMBERSHIP APPLICATION – Affiliate Member 2021**

Any person, partnership, business, or corporation who provides professional or other services or products that are not directly related to the lumber or building materials industry, and are not eligible for other membership categories.

Company Name:			
Mailing Address:			
City:	State:	Zip:	
Physical Address:			
Phone:	Fax:		
Website:			
Contact Information: Please list all company personnel who would offices. Primary Contact:	like to receive WCLBMA information. Member	ship includes all company locations includ	ing corporate
Name:	Title:	Email:	
Officers/Principles/Owners/Addition	onal Key Personnel:		
Name:	Title:	Email:	
Additional Locations:			
Company Name:			
Mailing Address:			
City:	State:	Zip:	
Phone:	Fax:		
Name:	Title:	Email:	
Name:	Title:	Email:	
Additional Locations:			
Company Name:			
Mailing Address:			
City:	State:	Zip:	
Phone:	Fax:		
Name:	Title:	Email:	
Namo:	Title	Email:	

Year business founded	Business Information:			
Payment Information:  Company Name:  Signature: Date:  Check Enclosed for \$600  Mail Check To:  WCLBMA • 177 Parkshore Drive • Folsom, CA • 95630 Phone (916) 235-7490 • Fax (916) 235-7496 • jeanh@lumberassociation.org  www.lumberassociation.org  MasterCard Visa Discover American Express  Company Name:  Card Number: CVV#: Expiration Date:	Year business founded			
Company Name:  Signature: Date:  Check Enclosed for \$600  Mail Check To: WCLBMA • 177 Parkshore Drive • Folsom, CA • 95630 Phone (916) 235-7490 • Fax (916) 235-7496 • jeanh@lumberassociation.org www.lumberassociation.org  MasterCard Visa Discover American Express  Company Name:  Card Number: CVV#: Expiration Date:	Brief description of business/company history/products and services:			
Company Name:  Signature: Date:  Check Enclosed for \$600  Mail Check To: WCLBMA • 177 Parkshore Drive • Folsom, CA • 95630 Phone (916) 235-7490 • Fax (916) 235-7496 • jeanh@lumberassociation.org www.lumberassociation.org  MasterCard Visa Discover American Express  Company Name:  Card Number: CVV#: Expiration Date:				
Company Name:  Signature: Date:  Check Enclosed for \$600  Mail Check To: WCLBMA • 177 Parkshore Drive • Folsom, CA • 95630 Phone (916) 235-7490 • Fax (916) 235-7496 • jeanh@lumberassociation.org www.lumberassociation.org  MasterCard Visa Discover American Express  Company Name:  Card Number: CVV#: Expiration Date:				
Company Name:  Signature: Date:  Check Enclosed for \$600  Mail Check To: WCLBMA • 177 Parkshore Drive • Folsom, CA • 95630 Phone (916) 235-7490 • Fax (916) 235-7496 • jeanh@lumberassociation.org www.lumberassociation.org  MasterCard Visa Discover American Express  Company Name:  Card Number: CVV#: Expiration Date:				
Company Name:  Signature: Date:  Check Enclosed for \$600  Mail Check To: WCLBMA • 177 Parkshore Drive • Folsom, CA • 95630 Phone (916) 235-7490 • Fax (916) 235-7496 • jeanh@lumberassociation.org www.lumberassociation.org  MasterCard Visa Discover American Express  Company Name:  Card Number: CVV#: Expiration Date:				
Company Name:  Signature: Date:  Check Enclosed for \$600  Mail Check To: WCLBMA • 177 Parkshore Drive • Folsom, CA • 95630 Phone (916) 235-7490 • Fax (916) 235-7496 • jeanh@lumberassociation.org www.lumberassociation.org  MasterCard Visa Discover American Express  Company Name:  Card Number: CVV#: Expiration Date:				
Company Name:  Signature: Date:  Check Enclosed for \$600  Mail Check To: WCLBMA • 177 Parkshore Drive • Folsom, CA • 95630 Phone (916) 235-7490 • Fax (916) 235-7496 • jeanh@lumberassociation.org www.lumberassociation.org  MasterCard Visa Discover American Express  Company Name:  Card Number: CVV#: Expiration Date:				
Signature: Date:  Check Enclosed for \$600  Mail Check To: WCLBMA • 177 Parkshore Drive • Folsom, CA • 95630 Phone (916) 235-7490 • Fax (916) 235-7496 • jeanh@lumberassociation.org www.lumberassociation.org  MasterCard	Payment Information:			
Check Enclosed for \$600  Mail Check To:  WCLBMA • 177 Parkshore Drive • Folsom, CA • 95630  Phone (916) 235-7490 • Fax (916) 235-7496 • jeanh@lumberassociation.org  www.lumberassociation.org  □ MasterCard □ Visa □ Discover □ American Express  Company Name:  Card Number: CVV#: Expiration Date:	Company Name:			
Mail Check To:  WCLBMA • 177 Parkshore Drive • Folsom, CA • 95630  Phone (916) 235-7490 • Fax (916) 235-7496 • jeanh@lumberassociation.org  www.lumberassociation.org  MasterCard □ Visa □ Discover □ American Express  Company Name:  Card Number: CVV#: Expiration Date:	Signature: D	ate:		
WCLBMA • 177 Parkshore Drive • Folsom, CA • 95630 Phone (916) 235-7490 • Fax (916) 235-7496 • jeanh@lumberassociation.org www.lumberassociation.org  MasterCard □ Visa □ Discover □ American Express  Company Name:  Card Number: CVV#: Expiration Date:	□ Check Enclosed for \$600			
Company Name:  Card Number:  CVV#: Expiration Date:	WCLBMA • 177 Parkshore Drive • Folsom, CA Phone (916) 235-7490 • Fax (916) 235-7496 •		ciation.org	
Card Number: CVV#: Expiration Date:	☐ MasterCard ☐ Visa ☐ Discover ☐ American E	Express		
<u>'</u>	Company Name:			
Name on Card: Signature:	Card Number:	CVV#:	Expiration Date:	
	Name on Card:	Signature:		

Membership in WCLBMA is deductible for Federal Income Tax purposes as ordinary and necessary business expenses according to IRS Code Section 182(e). A portion of dues is not deductible as ordinary and necessary business expenses to the extent WCLBMA engages in lobbying activities. The non-deductible portion of dues for this year is 25%.

Date:

Amount to Charge:

If Company Card, Co. Name:

