Western Illinois Builders Association



2163 E. Main St., P.O. Box 565 Galesburg, IL 61402-0565

Phone: 309-343-2116 Fax: 309-343-1114 Email: wiba@grics.net Website: www.wibaweb.org

APPLICATION	ON FOR MEMBERSHIP
TO: Western Illinois Builders Asso	ciation DATE:
FROM:	TITLE:
COMPANY NAME:	PHONE NO.
Years in Business	$\Gamma A \lambda N U$.
Web Site	E-mail:
Insurance Agent	
BUSINESS ADDRESS:(STREET)	
(3)	TREET)
(CITY) BANK / CREDIT REFERENCES:	(STATE) (ZIP)
OTHER REFERENCES	
CLASSIFICATION REQUESTED: BUILDER/REMODELER ASSOCIATE	
I agree to abide by the By-Laws and Code of Ethics of the Association to which this membership application is directed. A remittance of \$150.00, representing my annual membership dues in Western Illinois Builders Association accompanies this application.	
By signing this application I am giving my permission to check into the above references.	
Signature of applicant	
SPONSORED BY	
RETURN THIS APPLICATION WITH CHECK PAYABLE TO:	Western Illinois Builders Association P.O. Box 565 Galesburg, Il 61402-0565

IMPORTANT NOTICE

Dues payments to WIBA are not deductible as charitable contributions for federal income tax purposes. However, dues payments may be deductible as ordinary and necessary business expense.