

**WIA's State Wireless Association Program**  
*Membership Application*



Company \_\_\_\_\_ Year Established \_\_\_\_\_

Company Representative \_\_\_\_\_ Title \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Business Telephone (\_\_\_\_\_) \_\_\_\_\_ Fax (\_\_\_\_\_) \_\_\_\_\_

Email Address \_\_\_\_\_

Company's Primary Operation \_\_\_\_\_

**Annual Dues Information**

Annual dues for membership in WIA are based upon the package type selected:

|                     |                                      |
|---------------------|--------------------------------------|
| Basic Membership:   | \$5,000                              |
| Custom Membership*: | (Per attached Exhibit if applicable) |

\*Custom Memberships include "add-on" services to the Basic Membership package for associations that need more assistance than provided in the Basic package agreement. These are negotiated on an individual association basis.

**Payment Information:**

Please make all checks payable to WIA and mail to:

WIA – The Wireless Infrastructure Association  
2111 Wilson Blvd., Suite 210  
Arlington, VA 22201

c/o: Membership Dues \_\_\_\_\_ Enclosed is my check for annual dues

**Pay by Credit Card:**  American Express  VISA  MasterCard  Discover

Cardholder Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Credit Card Number: \_\_\_\_\_

Security Code: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

**For immediate processing, email this application to [ashley.jackson@wia.org](mailto:ashley.jackson@wia.org).**