



WHEAT RIDGE BUSINESS ASSOCIATION MEMBERSHIP APPLICATION
DATE OF APPLICATION: _____

COMPANY: _____ # OF EMPLOYEES _____

CONTACT NAME: _____ POSITION: _____

ADDRESS: _____

PHONE: _____ FAX: _____

EMAIL(S): _____

WEBSITE: _____

MEMBERSHIP FEES:

_____ **\$50, Silver Level Membership:**

- Business Categories for Website: _____ and _____

_____ **\$100 Gold Level Membership:**

- One Free Breakfast within 2 months of New Membership payment

- Business Categories for Website: _____ and _____

_____ **\$250 Sponsorship Level Membership:**

- One Punch Card which equals 6 breakfast meetings at no cost.

- Logo on the WRBA website

- Business Categories for Website: _____ and _____

***** If you would like others in your business to receive communications via email from WRBA please provide their email addresses on a separate piece of paper. *****

PAYMENT OPTIONS:

Credit Card: On-line at www.wheatridgebiz.com and send your application to LorettaDiTirro@gmail.com.

Check: Send this completed application with your check to:

Wheat Ridge Business Association
P.O. Box 1231
Wheat Ridge, CO 80034-1231

Contact Loretta DiTirro at 303.594.1520 with questions.