WAMI
Wisconsin Area Music Industry

WAMI MEMBERSHIP APPLICATION

If you are registering more than one person, please attach a separate form for each.

NAME: _____ BAND/BUSINESS NAME: _____

HOME ADDRESS: _____ BAND/BUSINESS ADDRESS: _____

_____ _____

CITY: _____ CITY: _____

STATE: _____ ZIP: _____ STATE: _____ ZIP: _____

PHONE: _____ PHONE: _____

E-MAIL: _____ FAX: _____

WEBSITE: _____

Please indicate where you would like to receive mail: _____ Home _____ Office
May we publish your contact information in a member directory?: _____ Yes _____ No

MEMBERSHIP RATES*:

A: Individual - $40 B: 2 - 4 Members - $120 C: 5 - 7 Members - $180**

* - Levels B and C refer to members registering as part of the same band or business.
** - Additional members beyond seven may be added at $20 per member.

Please use this area to select any committees you might be interested in being a part of:

_____ Long Range Planning _____ Sponsorship _____ Seminars

_____ Membership _____ Nominations & Balloting _____ Member Meetings

_____ Awards Show _____ Communications & Publicity _____ Youth Showcase

Please list your previous WAMI nominations and awards (add pages if necessary):

Performing Act	Were you a Nominee or Award Recipient	Category	Year

PAYMENT INFORMATION:

_____ @ Level A ($40) _____ @ Level B ($120) _____ @ Level C ($180) _____ @ Add. Members ($20 ea.) _____ **TOTAL**

What type of application is this? _____ Renewal _____ New Referrer's Name (if any): _____

_____ _____
Authorized Signature Date

Please mail completed application and payment to: WAMI, P.O. Box 510826, Milwaukee, WI 53202