Water and Sewer Distributors of America

Associate Membership Application ____



800 Roosevelt Road, C-312 Glen Ellyn, IL 60137 Phone: 630.672.3670 info@wasda.com www.wasda.com

Company Name		
Address		
City		Zip
Telephone	Fax	Company Email
Web	Branch Locations (if an	y)
Key Contact		Email
Title		Phone
Secondary Contact		Email
Title		Phone
	significant part of its busines ers, accessories and fittings f s own sales force?	s in manufacturing of waterworks or sewer and storm or sale through distribution?
Association Articles of Incorporation	and its Bylaws, will pay all applica b. By signing below, I agree to acc	oard. If admitted to membership, I will observe all provisions of the tion fees, dues and assessments, and will abide by the decisions of the cept communications from WASDA and <i>confirm that all information</i>
Signature	Tit	tle Date
 Membership Eligibilit To be eligible for associate n company must meet all of the Be a corporation, par proprietorship, or othe (or a subsidiary, affilia division of same). 	nembership in WASDA, a e following qualifications: tnership, individual er manufacturing business	Annual Membership Dues: \$2,200/year Payment Options: Payments via check should be made out to WASDA. Please include a copy of this application with your check. To pay by credit card, please submit this form and complete payment by phone at (630) 672-3670

- Have offices in North America.
- Engaged as a significant part of its business in the manufacturing of products for sale through distribution for use in water systems, wastewater systems, and storm water drainage.

and complete payment by phone at (630) 672-3670 or the online payment link provided by WASDA Staff. Next Steps:

The membership application will be sent to the board for approval; this process could take up to two weeks.