MEMBERSHIP APPLICATION

ORGANIZATION / COMPANY INFORMATION





Organization / Company Name Street Address (for package shipments) City, State, Zip+4/Postal Code PO Box (for U.S. Mail) City, State, Zip+4/Postal Code Main Phone Number Email Website NAICS Code Find your NAICS code at www.census.gov/naics **CONTACT INFORMATION** □ PRIMARY SAFETY AND HEALTH CONTACT Name Title Phone Email **□ BILLING CONTACT** (*if different from above*) Name Title Phone Email **NUMBER OF EMPLOYEES MEMBERSHIP RATE MEMBERSHIP RATES** 1-49 \$499 Membership pricing is based on total number of equivalent full-time employees 50-100 \$549 Number of Full-Time Employees 101-500 \$849 501-1,000 \$1,399 **Membership Dues Total** 1,001-5,000 \$2,899 5,001-10,000 \$7,999 10,001-20,000 \$15,999 **PAYMENT** Over 20,000 \$24,999 Please check one: ☐ Check Enclosed (payable to Wisconsin Safety Council) ☐ Bill My Credit Card: ☐ MasterCard ☐ Visa ■ American Express

To pay by credit card, please contact WSC directly at (608) 661-6914 or complete this form online at wisafetycouncil.org.