



2008 Membership Form

Name of Business: _____

Contact Name: _____

Business Position or Title: _____

Type of Business: _____

Address: _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Business Phone: _____ Business Fax: _____

Company Web Site: _____

Email: (For RMBA office use only) _____

May we contact you at work Yes No

Yearly Dues \$30 or \$50 if you want a direct link on RMBA website

Signature: _____ Date: _____

Please complete and mail with yearly dues to:

Rib Mountain Business Association
P.O. Box 5162
Wausau, WI. 54402-5162