

WEST SALEM BUSINESS ASSOCIATION MEMBERSHIP APPLICATION

Business Name

Contact Name

Mailing Address

Phone

Email

Website

Business Type (Please write a brief description of your business.)

Please check all that apply.

- Annual Dues: \$90 - January-December (This includes a link to your website.)**
- Donation: \$100 (To assist with banner cost and holiday decorations.)**

Please remit your application and payment to: WSBA - PO Box 5021 - Salem, OR 97304
Check out our web site at www.wsba-westsalem.com for more information