



# West Salem Business Association Membership Application

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Business Name

Number of Employees

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Contact Name

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Mailing Address

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Phone

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Email Address

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Website

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

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Please check all that apply.

**Annual Dues: \$90**

January-December (Includes website listing)

**Donation Amount: \$ \_\_\_\_\_**

To help assist with funding of West Fest and street decorations.

**Membership & Donation: \$ \_\_\_\_\_**

**Please remit application and payment to:  
WSBA ♦ PO Box 5021 ♦ Salem, OR 97304  
Tax I.D. number is: 93-0759965**