



Wayne, Pike, Sullivan Counties Antique Dealers Association
P.O. Box 448, White Mills, PA 18473
www.wpasada.com

**APPLICATION FOR MEMBERSHIP RENEWAL
DUE BY DECEMBER 31st**

Date: _____

1. Member name: _____

2. Doing business as: _____ Sales Tax # _____

Address: _____
Street or P.O. Box City State Zip

Phone: _____

Email: _____

Web Address: _____

() Enclosed is my \$30.00 annual dues fee for the upcoming year (20____) \$30.00

() Enclosed is my \$95.00 brochure ad fee for the upcoming year (20____) \$95.00

OFFICIAL USE Check # _____ Date: _____
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Total enclosed payable to: **WPSADA** \$ _____

Mail payment to: WPSADA, P.O. Box 448, White Mills, PA 18473

The brochure format will be similar to past years . All ads will continue to be the same size. Each member is eligible to purchase one spot. If a member is in a member co-op which is participating in the brochure and the individual member wishes to also advertise, he/she may do so providing their membership is in good standing and all fees are paid in a timely fashion.

Please check one:

() My ad copy will remain the same as last year.

() Please make the following changes to my copy. or attached is my new copy. (write on back of application).

Ad copy and payment in full due no later than December 31st for the upcoming year.

A proof will be made prior to publication. If you will be away for the winter months it is your responsibility to provide an address so we can furnish the proof. Proofs submitted for paid ads and not returned to the Brochure committee by the due date which accompany the proof will be ran "As Is".

To remain in good standing member agrees to be responsible for picking up and displaying and/or distributing the current brochure as well as the annual show cards/posters.

I have read, understand, and agree to the above.

Member's signature: _____

Date: _____