



Western Small Miners Association

P. O. Box 644
Naturita, CO 81422

Membership Application / Renewal

Company Name: _____

Representative Name: _____

Mailing Address: _____

City/State/Zip _____

Home Phone: _____ **Work Phone:** _____

How did you hear about us? _____

Email: _____

Are you a: **Company** _____
 Individual _____

Type of Membership dues per year:

	New	Renewal
Company Membership \$100.00	_____	_____
Individual Membership \$25.00	_____	_____

Why would you like to join the Western Small Miners Association?

Do you knowingly belong to any other organizations that conflict with the WSMA?
If yes, Explain: _____

Please include check for membership dues payable to: **Western Small Miners Association**
 P.O. Box 644
 Naturita, Co 81422

In the event you are declined membership, your fee will be returned to you.

I agree to abide by and uphold the Articles and Bylaws of the Association and participate and maintain good standing with the Association at all times. A copy of the Bylaws will be provided upon request. The Board of Directors reserves the right to terminate any member for failing to abide by the Bylaws or by conduct that is deemed detrimental to the WSMA.

Signature _____ **Date** _____