



S36 W29657 Wern Way Waukesha, WI 53189  
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### 2017-2018 Membership Form

Name \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Cell # \_\_\_\_\_  
Home Phone \_\_\_\_\_ email \_\_\_\_\_

If renewal, is this contact information different from last year? Y / N

New member? Y / N Referred by (if applicable): \_\_\_\_\_

**Membership Type:** Check the appropriate box below.

*5 ADDITIONAL BIRDS IF RECEIVED BEFORE JUNE 1<sup>ST</sup>!*

- \_\_\_\_\_ General 20 Bird- \$1395          Partners Membership? Yes or no
- \_\_\_\_\_ Weekday Only 20 Bird- \$1095      Partners Membership? Yes or no
- \_\_\_\_\_ Corp. 40 Bird- \$2640
- \_\_\_\_\_ Corp. 60 Bird- \$2940
- \_\_\_\_\_ Corp. 100 Bird- \$3440

If General/Weekday Partners Membership, please include partner contact information below:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Billing Address/Contact *if different than above*

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Corporate membership: if all information is the same as last year, please check here: \_\_\_\_\_  
Or, please list contact info of other named persons on membership below or on separate sheet:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please return to the address listed above- Thank you for your business!