

WAI CORPORATE MEMBERSHIP FORM

SAVE MORE WITH A
SUPERSONIC
WAI CORPORATE MEMBERSHIP

General Corporate Membership: \$400

BENEFITS:

- Advertising discounts in WAI publications
- *Aviation for Women* magazine and other WAI publications sent to one corporate member representative.
- Exhibitor discount at the annual conference
- Conference discounts for Primary representative at the Individual Member Rate

Supersonic Corporate Membership: \$500

ADDITIONAL BENEFITS:

- Individual memberships for three more representatives (\$135 value)
- Conference discounts for three more representatives (\$150 value)
- Plus all the General Corporate Membership benefits listed above

If you are already a corporate member and would like to move to Supersonic Level, pay just \$100 to take advantage of new benefits!

- \$400** General Corporate Membership. (Complete membership information, designating one corporate representative)
- \$500** Supersonic Level Corporate Membership. (Complete membership information for primary and three additional representatives.)
- \$100** Upgrade my organization's General Corporate Membership to Supersonic Level for \$100. (Complete membership information for three additional representatives.)

FORM OF PAYMENT

(Payment must be in U.S. dollars – Make check payable to Women in Aviation International)

- MasterCard VISA American Express Check # _____
- Acct Number _____
- Exp Date _____ Security Code _____ Billing ZIP Code _____
- Cardholder's Name (Print) _____
- Authorized Signature _____
(sign as name appears on credit card)

Company/Organization

PRIMARY REPRESENTATIVE:

Provide information if new General or Supersonic Level Corporate member.
(Designate one primary representative for either level of membership.)

Primary Representative's Name _____

Mailing Address _____

City _____ State _____ ZIP _____

Phone _____ Fax _____

Email _____

ADDITIONAL REPRESENTATIVES:

Provide information ONLY if upgrading or becoming a new Supersonic Level Corporate member. (Designate up to three additional representatives.)

1 Name _____

Mailing Address _____

City _____ State _____ ZIP _____

Phone _____ Fax _____

Email _____

2 Name _____

Mailing Address _____

City _____ State _____ ZIP _____

Phone _____ Fax _____

Email _____

3 Name _____

Mailing Address _____

City _____ State _____ ZIP _____

Phone _____ Fax _____

Email _____

