



Western Hardscape Association Membership Form

JOIN VIA CREDIT CARD:

* Email completed form to whapavers@gmail.com.

JOIN VIA MAIL:

* Review and confirm the contact information & mail this renewal form to the address listed below with payment.

**605 Industrial Way
Dixon, CA 95620**

WHA MEMBERSHIP INFORMATION

- **Membership Valid July 1 – June 30 each year.**
- WHA Member Only - \$300 full year; \$150 for half year (Jan – Jun).
- If holding a valid CMHA/CLCA membership - \$200 discounted rate full year; \$100 for half year.

Please provide company information as you would like to see it listed in our membership directory and website:

Company _____
 Address _____
 City _____ State _____ Zip _____ County _____
 Phone _____ Fax _____
 Website _____ General Email _____

- **Main Contact:** _____
 Email address _____ Direct Phone _____
- **2nd Representative's Name:** _____
 Email address _____ Direct Phone _____
- **3rd Representative's Name:** _____
 Email address _____ Direct Phone _____

- \$300 - WHA membership
- \$200 Discounted Members - Yes, I hold a partner organization membership
 CMHA CLCA membership number: _____

PAYMENT INFORMATION

Check (payable to WHA) Visa MasterCard Amex **Total \$:** _____

Credit Card #: _____ Exp Date: _____

Name on Card: _____ Signature: _____

CVV Code: _____ Billing Zip Code: _____

Please mail completed form and payment to:
Western Hardscape Association (WHA)
605 Industrial Way Dixon, CA 95620
whapavers@gmail.com