

Associate Member Registration

WTA Spring Meeting | March 31 - April 3, 2008
 The Meritage Resort & Spa
 875 Bordeaux Way, Napa, CA, 94558

Company Name: _____ Contact Person: _____

Email: _____ Telephone: _____ Fax: _____

Contact Mailing Address: _____ (All information pertaining to the meeting will be sent to the contact email/address only.)

I. SPONSORSHIP REGISTRATION:

SPONSORSHIPS <small>(CALL WTA FOR UP-TO-DATE SPONSOR INFORMATION)</small>	AFTER 2/29-\$795	AFTER 2/29-\$375	[LIMITED SPACE]	AFTER 2/29-\$150			
	ASSOCIATE MEMBER <small>(MEALS INCLUDED)</small>	SPOUSE/ GUEST <small>(MEALS INCLUDED)</small>	WINE TASTING <small>(MONDAY)</small>	WINE TASTING <small>(WEDNESDAY)</small>	GOLF FEE	GOLF HANDICAP	TOTAL
VINEYARD SPONSORSHIP - \$3,000	___ x \$695	___ x \$275	___ x \$45	___ x \$45	___ x \$140	___	\$ _____
CLARET SPONSORSHIP - SOLD	___ x \$695	___ x \$275	___ x \$45	___ x \$45	___ x \$140	___	\$ _____
MALBEC SPONSORSHIP - \$1500	___ x \$695	___ x \$275	___ x \$45	___ x \$45	___ x \$140	___	\$ _____
MERITAGE SPONSORSHIP - \$2500 (4)	___ x \$695	___ x \$275	___ x \$45	___ x \$45	___ x \$140	___	\$ _____
MEMBERS CLUB ROOM/TABLE TOP SPONSORSHIP - \$2500 each (25)	___ x \$695	___ x \$275	___ x \$45	___ x \$45	___ x \$140	___	\$ _____
REGISTRATION GIFT SPONSORSHIP - SOLD	___ x \$695	___ x \$275	___ x \$45	___ x \$45	___ x \$140	___	\$ _____
MERLOT SPONSORSHIP - SOLD	___ x \$695	___ x \$275	___ x \$45	___ x \$45	___ x \$140	___	\$ _____
WINE TASTING SPONSORSHIP - SOLD	___ x \$695	___ x \$275	___ x \$45	___ x \$45	___ x \$140	___	\$ _____
GOLF DRINK TICKET SPONSORSHIP - SOLD	___ x \$695	___ x \$275	___ x \$45	___ x \$45	___ x \$140	___	\$ _____
GOLF TOURNEY LUNCH BOX SPONSORSHIP - \$2,200	___ x \$695	___ x \$275	___ x \$45	___ x \$45	___ x \$140	___	\$ _____
SANDBAGGER SPONSORSHIP - \$2,200	___ x \$695	___ x \$275	___ x \$45	___ x \$45	___ x \$140	___	\$ _____
DUFFER SPONSORSHIP - \$1,700	___ x \$695	___ x \$275	___ x \$45	___ x \$45	___ x \$140	___	\$ _____
TEE SPONSORSHIPS (18) - \$250 each	___ x \$695	___ x \$275	___ x \$45	___ x \$45	___ x \$140	___	\$ _____
GOLF BALL SPONSORSHIP - \$2,200	___ x \$695	___ x \$275	___ x \$45	___ x \$45	___ x \$140	___	\$ _____
BOARD SPONSORSHIPS - \$600	___ x \$695	___ x \$275	___ x \$45	___ x \$45	___ x \$140	___	\$ _____

List Attendee/Guest/Spouse Name: _____ SUB TOTAL \$ _____

II. REGISTRATION: (NO SPONSORSHIP)

NAME	AFTER 2/29-\$895	AFTER 2/29-\$375	[LIMITED SPACE]	AFTER 2/29-\$150			
	ASSOCIATE MEMBER <small>(MEALS INCLUDED)</small>	SPOUSE/ GUEST <small>(MEALS INCLUDED)</small>	WINE TASTING <small>(MONDAY)</small>	WINE TASTING <small>(WEDNESDAY)</small>	GOLF FEE	GOLF HANDICAP	TOTAL
_____	___ x \$795	___ x \$275	___ x \$45	___ x \$45	___ x \$140	___	\$ _____
_____	___ x \$795	___ x \$275	___ x \$45	___ x \$45	___ x \$140	___	\$ _____
_____	___ x \$795	___ x \$275	___ x \$45	___ x \$45	___ x \$140	___	\$ _____
_____	___ x \$795	___ x \$275	___ x \$45	___ x \$45	___ x \$140	___	\$ _____

SUB TOTAL \$ _____

Non-Member Registration Fee \$995 / Social \$395
 (After 2/29 Non-Member Registration Fee \$1095 / Social \$495)

GRAND TOTAL \$ _____

III. PAYMENT INFORMATION:

I, _____, an authorized representative of _____, have read WTA's registration and sponsorship brochure and policies, and I understand and agree to the terms and conditions stated therein.

Type of Payment: () Check () American Express () MasterCard () Visa

By signing below, I hereby authorize WTA to charge my credit card for all applicable registration and sponsorship fees listed above. I understand and agree that registration fees may not be refundable, and that I shall not request a charge-back to my credit card for events for which I have agreed to register or sponsor. All payment disputes shall be resolved between myself and the Western Telecommunications Alliance.

Name as it appears on credit card: _____

Credit Card Number: _____ Expiration Date: _____ Code: (if applicable): _____

Signature: _____ Date: _____

**Fax this form to: 406.443.0591 OR mail with check payable to WTA, PO Box 5655, Helena, Montana 59604.
 Registration Questions? Please contact WTA at 406.443.6377 or email lea@w-t-a.org**