



WESTERN PETROLEUM MARKETERS ASSOCIATION

HAWAII • IDAHO • MONTANA • NEVADA • NEW MEXICO • UTAH • WASHINGTON

# Application For Membership

PO Box 571500 • Murray, Utah 84157-1500 • Tel: (801) 263-WPMA (9762) • Fax: (801) 262-9413 • [www.wpma.com](http://www.wpma.com)

Name of Company \_\_\_\_\_ Date \_\_\_\_\_

Contact Person \_\_\_\_\_ Title \_\_\_\_\_

Street Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Mailing Address \_\_\_\_\_  
(P.O. Box) \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Telephone (\_\_\_\_) \_\_\_\_\_ Fax (\_\_\_\_) \_\_\_\_\_

E-mail \_\_\_\_\_ Annual Gallons \_\_\_\_\_  
(of all fuels and lubricating products sold)

### Check all that apply:

- Wholesale Marketer** \_\_\_\_\_  
[Brand(s)]
- Retail (C-Store Marketer)** \_\_\_\_\_  
[Brand(s)]
- Associate** \_\_\_\_\_  
(Type of Business)
- Other** \_\_\_\_\_

### We are interested in the following member services:

- Group Health** Insurance
- Group Life** Insurance
- Casualty** Insurance
- Other \_\_\_\_\_

Dues include membership in a WPMA state, membership in WPMA, listing in the WPMA Membership Directory, and a subscription to the Western Petroleum Marketers News Magazine. The magazine and directory are distributed to members and associate members. Associate members are listed in the directory, each issue of the Magazine and on the WPMA Web site: [www.wpma.com](http://www.wpma.com).

Active Membership Dues Per Year:	
<input type="checkbox"/>	0 - 3 million gal/yr: ..... \$375/yr
<input type="checkbox"/>	3 - 5 million gal/yr: ..... \$500/yr
<input type="checkbox"/>	5 - 7.5 million gal/yr: ..... \$650/yr
<input type="checkbox"/>	7.5 - 10 million gal/yr: ... \$800/yr
<input type="checkbox"/>	10 - 15 million gal/yr: .... \$1,000/yr
<input type="checkbox"/>	15 - 25 million gal/yr: .... \$1,200/yr
<input type="checkbox"/>	25 - 50 million gal/yr: .... \$1,850/yr
<input type="checkbox"/>	50 - 100 million gal/yr: .. \$2,350/yr
<input type="checkbox"/>	100+ million gal/yr: ..... \$2,950/yr

WPMA STATES Associate Member Dues	
States	Amount
<input type="checkbox"/> HI	_____
<input type="checkbox"/> ID	_____
<input type="checkbox"/> MT	_____
<input type="checkbox"/> NV	_____
<input type="checkbox"/> NM	_____
<input type="checkbox"/> UT	_____
<input type="checkbox"/> WA	_____
<b>Total</b>	_____

**Dues:**  
**1-2 states:** \$500/state  
**3-5 states:** \$465/state  
**6-7 states:** \$425/state

*[For example:  
if you join in four (4) states,  
your total dues would be  
4 x \$465 = \$1,860]*

**Check Enclosed** or **Charge My:**  MasterCard  Visa  American Express  Discover

Account # \_\_\_\_\_ Exp. Date \_\_\_\_\_

Signature \_\_\_\_\_ Print Name \_\_\_\_\_ Referred By \_\_\_\_\_