

Check#: _____ Date Rcv'd: _____

Western Regional Button Association

VOTING MEMBERSHIP APPLICATION FORM



I, _____ would like to become a 2025 voting member of the Western Regional Button Association by making a contribution of \$_____ (minimum \$10) in support of the organization.

Email _____ Phone : _____

Address: _____

City: _____ State: _____ Zip: _____

Please check one.

I already have a WRBA login account.

Please add me on WRBA.

Send this upper portion with a CHECK payable to WRBA.



Retain the lower portion for your records.

A check payable to WRBA (Western Regional Button Association) should be mailed to:



Eileen Burke-Trent, WRBA Treasurer
2029 Shiloh St. SE
Salem, OR. 97306

Email question or PayPal to: treasurer@wrba.us

Total:\$ _____

Check#: _____ **Date Mailed:** _____

2025 WRBA Voting Member is an individuals who meets one of the following criteria:

- Was a WRBA member in good standing as of 12/31/2024; or
- Has a WRBA login account and made a voluntary contribution of a minimum of \$10 in support of the Association's operations for 2025, demonstrating their commitment to the organization and its mission with a desire to be a voting member.

Individuals granted free 'log-in access' who have not met either of the above criteria are not considered voting members.

WRBA is a 503c(7) Nonprofit Organization.