

To join the Wisconsin Arson Insurance Council, please print this page, complete the application, and send the application with a check for \$15 (annual dues) to

WAIC C/O Allmark Services
P.O. Box 751
Brookfield, Wisconsin 53008-0751

Your application will be reviewed by our membership committee, and, if approved, membership information and a receipt will be sent you. If your application is declined, your check will be returned to you.

NAME

ORGANIZATION

TITLE _____ *PHONE*
(_____) _____

*STREET
ADDRESS*

CITY _____ *STATE* _____ *ZIP*

FAX NUMBER (_____) _____

TELEPHONE NUMBER (_____) _____

E-MAIL ADDRESS:

Membership dues to W.A.I.C. are Tax-Deductible