MEMBERSHIP DIRECTORY FORM

If you would like your company to be listed in the upcoming WEMCO Membership Directory, please complete the form below:

Company Name: ____________________________
Company Address: ____________________________
City: __________________ State: ___________ Postal Code: ___________ Country: ___________
Phone: __________________ Fax: __________________
E-Mail: __________________
Web Site: __________________

Company Representative (Feel free to list more than one representative if you choose):

Name: __________________ Title: __________________ E-Mail: __________________
Name: __________________ Title: __________________ E-Mail: __________________
Name: __________________ Title: __________________ E-Mail: __________________

Company Description and Products Manufactured in 75 words or less:

______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________

If your company has additional branches you would like listed, please indicate the branch address, phone, fax, and representative(s) below:

______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________

Thank you for completing the WEMCO Directory Form. Completed forms can be sent via e-mail, fax, or U.S. postal service.

WEMCO, 550 NW LeJeune Road, Miami, Florida 33126 • Tel: 305-443-9353, ext. 444 • Fax: 305-442-7451 • E-mail: wemco@aws.org