



Wisconsin Collision Repair Professionals

PO Box 841
Merrill, WI 54452-0841
Phone: (262) 542-7707
Email: wcrpinfo@gmail.com
Website: www.wcrp.pro

Membership Application

Dear Members:

Your membership, input, and participation in our organization is what makes WCRP work! The WCRP Board of Directors and I are working on some exciting changes that will bring solid value to your shops. These changes will put Wisconsin at the forefront of our industry to improve what we do for our shops and our customers. Remember we are stronger together! Watch your inbox, watch the mail, and most importantly don't go away...

WE NEED YOU!

**Andy Grundman,
President**

As a member of Wisconsin Collision Repair Professionals (WCRP) I understand membership is subject to acceptance by the association and is non-transferable. It is also understood that WCRP membership dues may be deductible as a business expense for federal income tax purposes, but are not tax deductible as a charitable contribution.

Company Name: _____

Contact: _____ Title: _____

Address: _____

City/State/Zip: _____ / _____ / _____

Phone: _____ Email: _____

Website: _____

Number of Employees (including owners): Technicians: _____ Office: _____

As a member of Wisconsin Collision Repair Professionals (WCRP) I promise to abide by the Association's Bylaws and Code of Ethics. I understand any signs, decals or emblems provided by the Association remain the property of the Association and agree to return them upon termination of membership. I further understand businesses that are members in good standing may use the WCRP logo. **Should our membership expire, I agree, at that time, to discontinue all uses of the association's logo and signs.**

Print Name: _____

Signature: _____ / Date: _____

Membership dues are **\$250 per year. Additional locations are at an OPTIONAL discount of 50% at \$125 per location.** (Please supply a separate form for each additional location.)

Educational Members are **\$250 per school.**

Associate Members are **\$250 per year.**

RETURN PAYMENT & FORM TO:

C/O Deb Brunett
WCRP
P.O. BOX 841
MERRILL, WI 54452-0841
PHONE: (262) 542-7707

WCRP accepts American Express, Mastercard, and Visa.

Contact our office at 262-542-7707 to pay by credit card.

PLEASE do not send credit card info via e-mail. If paying by credit card, please email this form to wcrpinfo@gmail.com.