

Name of Firm _____

Contact Person _____

Address _____

City _____ State _____ Zip Code _____

Telephone _____ Fax _____

Email address _____ Website _____

Location(s) of other office(s) (Wisconsin and out of state) _____

Is your firm regularly engaged in the sale of goods or services to Wisconsin financial institutions? Yes No

Please list two Wisconsin financial institutions or other business references with your contact's name and telephone number.

Contact _____ Telephone _____

Bank/organization _____

Contact _____ Telephone _____

Bank/organization _____

Please include the following with this application:

Yes, our company's brochure is attached.

If no, please give details. _____

Yes, our company's financial statement or annual report is attached.

If no, please give details (i.e., privately held, etc.) _____

Please check one box next to the category below that best describes the product or service your company provides:

- | | | |
|---|--|---|
| <input type="checkbox"/> Accounting/Auditing | <input type="checkbox"/> Credit Rating Agency | <input type="checkbox"/> Legal Services |
| <input type="checkbox"/> Architects/Bank Remodel | <input type="checkbox"/> Data Processing Services | <input type="checkbox"/> Lending Services |
| <input type="checkbox"/> ATM/POS Networks | <input type="checkbox"/> Document Management Solutions | <input type="checkbox"/> Loan Grading |
| <input type="checkbox"/> Banks | <input type="checkbox"/> Economic Development | <input type="checkbox"/> Marketing |
| <input type="checkbox"/> Benefits Planning | <input type="checkbox"/> Electric Transmission Service | <input type="checkbox"/> Miscellaneous |
| <input type="checkbox"/> Business Continuity Planning | <input type="checkbox"/> Environmental Risk Tools | <input type="checkbox"/> Mortgage Insurance |
| <input type="checkbox"/> Business Outsourcing | <input type="checkbox"/> Executive Search Firm | <input type="checkbox"/> Property Disposition |
| <input type="checkbox"/> Check Printing and Products | <input type="checkbox"/> Financial Product Assistance | <input type="checkbox"/> Regulatory Compliance Services |
| <input type="checkbox"/> Communication Security Services/IT | <input type="checkbox"/> Government Agencies/Lending Service | <input type="checkbox"/> Research Consultants |
| <input type="checkbox"/> Computer Processing and Software Systems | <input type="checkbox"/> Insurance Services | <input type="checkbox"/> Sales and Service Culture Implementation |
| <input type="checkbox"/> Consulting Services | <input type="checkbox"/> Investment Banking Services | <input type="checkbox"/> Web Site Development |
| <input type="checkbox"/> Correspondent Services | <input type="checkbox"/> Investment Broker/Dealer | <input type="checkbox"/> Other (list product/service, below) |
| <input type="checkbox"/> Credit Counselors | <input type="checkbox"/> Investment Subsidiary Services | _____ |

WBA Associate Member dues are \$1,500 per year. Membership will automatically renew each year unless you provide WBA with 30 day prior written notice of non-renewal. Dues are prorated on a semi-annual basis; please contact Daryll Lund, 608/441-1203 or Nick Lopponow, 608/441-1208 for the current dues amount.

(Please submit your payment with this completed application)

Signature _____ Date _____

(over)

Wisconsin Bankers Association
Associate Member Application

Please provide a brief (100 word limit) description of your firm's business (include details of what your activities are in Wisconsin). This information will be used for your profile on WBA's website (www.wisbank.com).

How do you believe your firm will benefit by joining WBA?

Thank you for your interest in WBA Associate Membership. If you have questions, please contact a WBA representative at sales@wisbank.com.