

**WESTERN LOSS ASSOCIATION  
VENDOR MEMBERSHIP APPLICATION**

**PURPOSE: To secure greater efficiency in the adjustment of property losses through education and training.**

**New Membership  
Or  
Renewal Membership**

DATE: \_\_\_\_\_

\$200 per Company – One Year Membership.

\$350 per Company – Two Year Membership.

COMPANY NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY STATE ZIP: \_\_\_\_\_

PHONE: \_\_\_\_\_ FAX: \_\_\_\_\_

CONTACT NAMES & E-MAILS: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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\_\_\_\_\_

Tax I.D. # 36-3992929

Make Check Payable to: “Western Loss Association” and send regular mail (please do not overnight) to:

WESTERN LOSS ASSOCIATION  
9 MIRTA CIRCLE  
LEMONT, IL 60439