

Winery or organization: __

325 Washington St. NE Box #302 • Olympia, Washington 98501 Phone (253) 228-1590 • www.washingtonwineinstitute.org

WASHINGTON WINE INSTITUTE: 2017 Membership Form

Address: _			
Contact na	me:	ations:	
E-man add Telephone		ations.	
	referred by another win	ery? List referral	
		with your dues payment to the following addre	
		Vashington St. NE Box #302, Olympia, WA 985	
	MEMBERSHIP DUES		
		member's total cases sold in the prior calenda	
Please mar	k your winery's catego	ry and report your 2017 dues amount based of	on the calculations below.
 Category	Winery Case Sales	Annual Assessment	Report your cases sold and
= 5 ,	<u></u>		calculate total dues amount
			Example: X cases = \$
l	Pre-release winery	\$200	
2	< 1,000 cases	\$ 350	
3	1,001 - 2,500	\$ 350 + 30 cents/case over 1,000 cases	
4	2,501 - 5,000	\$ 800 + 20 cents/case over 2,500 cases	
5	5,001 - 8,000	\$ 1,300 + 15 cents/case over 5,000 cases	
6	8,001 - 12,000	\$ 1,750 + 12 cents/case over 8,000 cases	
7	12,001 - 50,000	\$ 2,230 + 10 cents/case over 12,000 cases	
3	50,000 +	\$ 6,030 + 8 cents/case over 50,000 cases	
)	Maximum Dues	\$11,500	
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WA Wine	e PAC		
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Γhe WA W	ine PAC is the Washing	ton Wine Institute's Political Action Committe	ee, created to provide our industry with the
opportunity	to support those state c	andidates for elected office that have stepped u	p and shown their willingness to be leaders
		from harmful legislation as well as sponsorship	
		lease consider supporting the WA Wine PAC b	
annual W W	I dues so that we may s	trengthen our ability to support those who supp	oort the Washington wine industry.
Yes.	I will support the WA W	ine PAC with an additional 5% added onto my ar	nnual WWI dues' payment
	7 11	,	1 3
		le contributions for federal income tax purposes. The I	
	ense deduction for dues paid a business expense	to associations that engage in lobbying activities. Base	ed on IRS criteria, 50% of your WWI dues are not
		Il-volunteer associations, \$750 for staffed associations,	complimentary membership for educational
nstitutions a	nd programs.	-	
	via Credit Card)	_	
Credit Ca	ard #	Exp Date:	CC 3 digit code:
~:			
Signature		Date Printed name	