



WEST VIRGINIA CRAFT BREWERS GUILD

ALLIED MEMBERSHIP APPLICATION

MEMBER INFORMATION

☐ New Member

☐ Membership Renewal

Company Name: _____

Type of Business (services and/or goods provided): _____

MEMBERSHIP TYPE

☐ Brewery Members

☐ Brewery in Planning Members

☐ Distributor Members

☐ Associate Members

☐ Retail Members

☐ Enthusiast Members

Primary Contact/Job Title: _____

Email Address: _____

Mailing Address: _____

City, State, Zip: _____

Phone Number: _____

Fax Number: _____

Website: _____

BILLING INFORMATION

☐ Check Enclosed

☐ Same as Above

Name: _____ Email: _____

Address: _____ City / State / Zip: _____

If you are interested in trading services in lieu of payment, we will contact you to discuss the details of this arrangement. The West Virginia Craft Brewers Guild reserves the right to refuse the offer of Trade if it does not require the need for the services offered. Please return this form with your form of payment to the address below. Please make checks payable to West Virginia Craft Brewers Guild.

West Virginia Craft Brewers Guild
PO Box 102
Charleston, WV 25321

Or email a second copy of the completed application to info@wvbrewersguild.com