

# Association of West Virginia Solid Waste Authorities -- AWVSWA Membership Application

Please complete all sections of the application.  
(PRINT OR TYPE LEGIBLY)

---

Name: First Middle Initial Last

---

Solid Waste Authority Name: Title

---

Contact Name: Title

---

Address

---

City/County/State/ZIP

---

Business Phone Home Phone Fax

---

E-mail address. AWVSWA does not sell or rent its mailing list.

Association/SWA Annual Dues: **\$200.00**

Optional:

I hereby apply for membership in AWVSWA. I agree to comply with the requirements of the Bylaws adopted by the Association of West Virginia Solid Waste Authorities.

**Bylaws can be found on the AWVSWA web site at:**

[www.AWVSWA.com](http://www.AWVSWA.com)

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/20\_\_\_\_

Mail Completed Application with Payment to:

**Association of West Virginia Solid Waste Authorities  
2805 White Hall Blvd.  
White Hall, WV 26554**