



WABA MEMBERSHIP FORM

2801 International Lane, Suite 105 • Madison, WI 53704

Phone: (608) 223-1111 • Fax: (608) 223-1147

Dues to WABA are not deductible as a charitable contribution but may be deductible as an ordinary and necessary business expense. A portion of dues however, is not deductible as an ordinary and necessary business expense to the extent that WABA engages in state or federal lobbying. The non-deductible portion of dues for 2025-2026 is 15%. This information is provided as a courtesy to our members and does not constitute legal or accounting advice; consult your tax professional in the preparation of your returns.

A) A Regular Member is a corporation, firm, cooperative, partnership, or business whose primary function is the buying, selling, receiving, delivery, merchandising, manufacturing, processing, applying physical product, or conditioning of food, fiber, grain, feed (complete, premix, supplements or ingredients), seed (including inoculants and seed treatments), crop nutrients, crop protection products, equipment or related agricultural products across Wisconsin, the United States, or Internationally.

(Ex.: grain elevators, crop nutrient providers, crop protection providers, feed mills, feed manufacturers, fertilizer manufacturers, chemical manufacturers, seed companies (all phases of production and sales), grain processors, ethanol manufacturers, agricultural equipment manufacturers and sales, etc...)

B) A corporation, firm, cooperative, partnership, or business whose primary function is to provide support and/or services to the industries of buying, selling, receiving, delivery, merchandising, manufacturing, processing, applying physical product, or conditioning of food, fiber, grain, feed, seed, crop nutrients, crop protection products, equipment or related agricultural products, or otherwise has a mutual interest in such industries but is not directly engaged in such industries.

(Ex.: brokerage firms, computer software providers, scale companies, accounting firms, environmental and engineering firms, millwright companies, buildings and facilities construction firms, insurance providers, employee recruiting firms, banks and financial services, news media, attorneys, laboratories, inspection services, advertising agencies, appraisal services, consulting firms, transportation providers, etc...)

Regular Members have voting rights on all official WABA business, with one vote per company. Regular Members are entitled to as many company contact persons on the WABA contact list as so desired. Regular Members are also entitled to list all of their facilities in the membership directory. Any and all Regular Member's employees are also entitled to serve on committees and actively participate in WABA events.

The recommended membership dues investment for Regular Members is determined by the company's gross dollars of sales and related services made annually in the State of Wisconsin. Do not include sales or services provided outside of the State of Wisconsin or sales of products not listed above (Ex.: liquid fuels, LP, convenient store products, household appliances, etc...).

REGULAR MEMBER INVESTMENT SCHEDULE (Effective 8/1/2025)

Gross Sales & Related Services	Annual Investment
\$0 - \$5,000,000	\$800
\$5,000,000 - \$25,000,000	\$2,000
\$25,000,000 – \$100,000,000	\$3,200
\$100,000,000 and over	\$6,000

Based on our gross sales and related services, our annual membership investment is:

TOTAL INVESTMENT FOR REGULAR MEMBERSHIP

\$_____

Please return the company information sheet, this investment calculation sheet, and additional contact pages, along with payment for your dues investment to:

Wisconsin Agri-Business Association

2801 International Lane, Suite 105
Madison, WI 53704



ASSOCIATE MEMBERS

Associate Memberships are companies or individuals that are engaged in a business allied or related to the grain, feed, seed, fertilizer or chemical business, OR are in the grain, feed, seed, fertilizer or chemical business located outside of the State of Wisconsin. Associate Members do not have voting rights on official WABA business. Associate Members are entitled to one company contact and location in the annual directory. Associate Members are entitled to participate in WABA events, and serve on WABA committees.

ASSOCIATE MEMBERS DUES INVESTMENT

\$780

EDUCATORS /GOVERNMENT EMPLOYEES

Educators and Government Employees do not have voting rights in official WABA business. Educators and Government Employees will be included on the WABA contact list. Educators and Government Employees are also entitled to serve on committees and actively participate in WABA events.

EDUCATORS/GOVERNMENT EMPLOYEES DUES INVESTMENT

\$50

RETIRED/LIFETIME MEMBERS

Retired Members are those individuals who have retired from business, but would like to stay connected to the industry and the association. Retired Members do not have voting rights in official WABA business. Retired Members will be included on the WABA contact list. Retired Members are invited to actively participate in WABA events.

RETIRED/LIFETIME MEMBERS DUES INVESTMENT

Annual Membership	\$30
Lifetime Membership	\$275

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Wisconsin Agri-Business Association
2801 International Lane, Suite 105
Madison, WI 53704

Payment may also be made online at www.wiagribusiness.org

MEMBER COMPANY INFORMATION

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Please Type or Print

The information about your company will be listed in the WABA Annual Directory unless otherwise specified. If you are a sales rep with no physical office, please list the office headquarters address or leave it blank.

Company:

Company Address: _____

City: _____ State: _____ Zip: _____

County: _____

Phone Number: _____ Cell: _____

Fax Number: _____

Company Website Address:

Name of Primary Contact and Title:

Primary Contact E-mail Address (**majority of all correspondence will be emailed**)

Licenses: (ex: Feed Manufacturing, Grain Dealer, Fertilizer Dealer, Commercial Pesticide Applicator, etc)

Business Types: (ex: Fertilizer, Chemical, Wholesale Feed Manufacturer, etc)

Railroads Used: _____

In Business Since: _____ Number of Employees (all locations): _____

Memberships: (example: NGFA, AFIA, etc) _____

List additional contact names and emails on the next page.

Other Primary Contact Names & Information

CEO/General Manager _____

Mailing Address _____ City _____ State _____ Zip _____

Phone No. _____ Cell No. _____ Fax No. _____ Email _____

Address _____

CFO _____

Mailing Address _____ City _____ State _____ Zip _____

Phone No. _____ Cell No. _____ Fax No. _____

Email Address _____

Communications Director _____

Mailing Address _____ City _____ State _____ Zip _____

Phone No. _____ Cell No. _____ Fax No. _____

Email Address _____

Human Resource Director _____

Mailing Address _____ City _____ State _____ Zip _____

Phone No. _____ Cell No. _____ Fax No. _____

Email Address _____

Safety Director _____

Mailing Address _____ City _____ State _____ Zip _____

Phone No. _____ Cell No. _____ Fax No. _____

Email Address _____

Agronomy Manager _____

Mailing Address _____ City _____ State _____ Zip _____

Phone No. _____ Cell No. _____ Fax No. _____

Email Address _____

Feed Manager _____

Mailing Address _____ City _____ State _____ Zip _____

Phone No. _____ Cell No. _____ Fax No. _____

Email Address: _____

Grain Manager _____

Mailing Address _____ City _____ State _____ Zip _____

Phone No. _____ Cell No. _____ Fax No. _____

Email Address _____

Seed Manager _____

Mailing Address _____ City _____ State _____ Zip _____

Phone No. _____ Cell No. _____ Fax No. _____

Email Address _____

Facility Manager _____

Mailing Address _____ City _____ State _____ Zip _____

Phone No. _____ Cell No. _____ Fax No. _____

Email Address _____

Additional Contacts other than listed on the enclosed pages

Location _____
Mailing Address _____ City _____ State _____ Zip _____
Phone No. _____ Cell No. _____ Fax No. _____
Manager or person whom correspondence should be addressed: _____
Email Address (majority of correspondence will be emailed) _____

Location _____
Mailing Address _____ City _____ State _____ Zip _____
Phone No. _____ Cell No. _____ Fax No. _____
Manager or person whom correspondence should be addressed: _____
Email Address (majority of correspondence will be emailed) _____

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Please make more copies of this page as needed.