

**WISCONSIN TRAFFIC SAFETY OFFICER'S ASSOCIATION (WTSOA)  
MEMBERSHIP APPLICATION / RENEWAL FORM**

Please fill out form completely

\*NAME: \_\_\_\_\_

\*DEPARTMENT: \_\_\_\_\_

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

CITY/STATE/ZIP \_\_\_\_\_

HOME PHONE: \_\_\_\_\_

\*PRIMARY EMAIL ADDRESS: \_\_\_\_\_

\*WORK ADDRESS: \_\_\_\_\_

\*CITY/STATE/ZIP: \_\_\_\_\_

\*WORK PHONE: \_\_\_\_\_

CELLULAR/MOBILE PHONE: Work: \_\_\_\_\_ Personal: \_\_\_\_\_

SECONDARY EMAIL: \_\_\_\_\_

INSTRUCTOR CERTIFICATIONS/SPECIALIZED TRAINING (PLEASE BE SPECIFIC) : \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

WOULD YOU BE WILLING TO TEACH/HOST ASSOCIATION SPONSORED TRAINING?

YES  NO  MAYBE

**MEMBERSHIP FEES \$30.00 ANNUALLY, January 1<sup>ST</sup> THROUGH December 31<sup>ST</sup>**

*Note; to be eligible for member conference registration fee rates, your membership dues must be current as of the January 1<sup>st</sup> prior to the conference.*

CHECK PAYABLE TO WI TRAFFIC SAFETY OFFICER'S ASSOCIATION

Mail to: WTSOA Treasurer c/o Lt Grant Peterson  
Lincoln County Sheriff's Department  
1104 East First Street  
Merrill, WI 54452