



WfCP Enrollment Form

YES, enroll me as an Advanced Member of WfCP. I am including my \$125 annual membership fee. Please send my membership packet, textbook, marketing materials, quarterly trend publication Style School and free subscription to Window Fashions PLUS I will register my company on the Members Only portion on the www.wfcpro.com website.

Name _____

Company _____

Street Address (no PO's) _____

City _____ State _____ Zip _____

Phone _____ Fax _____

Email Address* (Please PRINT clearly) _____

Method of payment () Check # _____ () MasterCard () VISA

Credit Card # _____ Exp. Date _____

Signature _____ Date _____

**Mail enclosed form to: WfCP, 4215 White Bear Pkwy, St. Paul, MN 55110
Attn: Jean Grams Or fax to 651/653-4308**

* Participants thereby give GMI and/ or its affiliates, representatives or clients their consent to be contacted even if currently listed on any state or federal do not call list.