

# 2026 MEMBERSHIP APPLICATION

## WTA Vote Authorization Form

### DUES INFORMATION:

\*Total number of fixed broadband subscriptions as of 12/31/23 as reported on the March 1, 2024, FCC Broadband Data Collection filing for all operating companies.

(1) If the FCC replaces or discontinues the requirement that all providers file FCC Broadband Data Collection Filing, WTA will use whatever replaced broadband count reporting tool the FCC determines to calculate dues.

(2) Mobile wireless is not considered a "fixed broadband subscription."

(3) Contact [kelly@w-t-a.org](mailto:kelly@w-t-a.org) for 2025 Dues Structure

### 2026 WTA CATEGORY I & II DUES:

Group: \_\_\_\_\_ = Dues Rate: \$ \_\_\_\_\_



\_\_\_\_\_  
(Year) Member Authorization to Cast Vote

\_\_\_\_\_  
(State)

\_\_\_\_\_  
(Company name) A corporation and active member of WTA, by and through its duly authorized officials, pursuant to Article III, Section 3.01(a) and (b) of the By-Laws of WTA, hereby designate.

\_\_\_\_\_  
(Voting representative's name) to cast any vote for and on its behalf of any WTA voting matter until further written notice to WTA.

\_\_\_\_\_  
(GM or President Signature)

\_\_\_\_\_  
(Date)

**Please include all companies. Attach additional sheets if necessary.**

Company Name: \_\_\_\_\_  
Headquarters Address: \_\_\_\_\_ City: \_\_\_\_\_  
State: \_\_\_\_\_ Zip: \_\_\_\_\_ Telephone: ( ) \_\_\_\_\_  
Website Address: \_\_\_\_\_

Company Name: \_\_\_\_\_  
Headquarters Address: \_\_\_\_\_ City: \_\_\_\_\_  
State: \_\_\_\_\_ Zip: \_\_\_\_\_ Telephone: ( ) \_\_\_\_\_  
Website Address: \_\_\_\_\_

Primary Contact Name: \_\_\_\_\_ Title: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Telephone: ( ) \_\_\_\_\_ Email: \_\_\_\_\_

Additional Contact Name: \_\_\_\_\_ Title: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Telephone: ( ) \_\_\_\_\_ Email: \_\_\_\_\_

Additional Contact Name: \_\_\_\_\_ Title: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Telephone: ( ) \_\_\_\_\_ Email: \_\_\_\_\_

Please mail **DUES** with check payable to WTA, PO Box 7207, Helena, MT 59604.  
Questions? Contact Kelly Worthington at 406.443.6377 or [kelly@w-t-a.org](mailto:kelly@w-t-a.org) | WTA Federal Tax ID Number: 75-3120988