

Beaverton Business Association Membership Application/Renewal

Please print and send this completed form with your check to

BABA
P.O.Box 415
Beaverton, MI 48612

Contact Name: _____ Phone : _____

Business Name: _____

Business Phone: _____ FAX: _____

Mailing Address: _____

E-Mail: _____

Business Type: _____
(from BABA website)

Website/Page Address: _____
(ex; <http://www.name.com> etc.)

*4th of July Celebration Donation _____

*Christmas in the Park Donation _____

*Sponsor of Meeting \$25.00 _____

*The sponsor of a meeting will be given extended time on the agenda to distribute materials and speak about your product or service.