



**2010
MEMBERSHIP
APPLICATION**

January 1 – December 31, 2010

\$30.00 Annual Fee

Business Name: _____

Business Address: _____

Mailing Address (if different): _____

Telephone No.: _____ Fax No.: _____

Business Website: _____

Type of Business: _____

Contact Information (This is the person to whom all mailings will be sent and who will be listed as your main contact person.)

Name: _____ Title: _____

Address: _____

Email address: _____

If there are others in your business who would like to receive our mailings, please list their names and e-mail addresses: _____

Membership in Clyde BPA includes a listing in the annual Clyde Community Service Directory published in May as well as a link to your business website from the Clyde BPA website.

Please make check payable to Clyde BPA

Return completed form with check to:

Clyde BPA
PO Box 351
Clyde OH 43410

For more information about the Clyde BPA, please visit www.clydebpa.org