



Application for Membership

Membership in the **Amwell Valley Business Association** is open to all business in the greater Amwell Valley. Membership dues are \$75.00 per year payable with this application and on January 2 in subsequent years.

Please type or print legibly. Information provided will be included in the AVBA Membership Directory.

___ **Yes, I want to join the AVBA. Payment of \$75.00 is**

enclosed.

Name: _____ Date: _____

Address: _____

City: _____ State: _____ Zip: _____

Hm. Phone: () _____ Email Address: _____

Business Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Bus. Phone: () _____ Bus. Fax: () _____

Business Yellow Page Listing: _____

Nature of Business: _____

Number of years in business: _____ At this location? _____

Describe any unique products or services: _____

Business licenses, degrees held, specialized training completed: _____

Other professional or business affiliations: _____

Signature: _____

Please make check payable to: AVBA and mail with this form to: AVBA PO Box 158 Ringoes NJ 08551