



Serving Businesses, Community and Government

2017 Application for Membership

Please print all information.

General Business Information	
Business Name:	
Phone: ()	Physical Address:
Fax: ()	
Web site:	Mailing Address (if different than above):
Contact Information MUST be completed	
Business Category: (i.e. Senior Care, Banking, Food Service)	
Main Business Contact Name:	Title:
E-mail:	Phone: () Ext:
Other Key Contact(s)	
Name:	Title:
E-mail:	Phone: () Ext:
(If different than contact above, please fill in the following:)	
Name:	Title:
Mailing Address:	E-mail:
	Phone: () Ext:
	Fax: ()
Continued on next page	

I understand the benefits of Millersville Business Association membership to my company and its employees. I recognize that our support of the Millersville Business Association as demonstrated through our membership, contributes to a positive business climate and quality of life for the Millersville area. To the best of my ability I will help to serve other businesses, the community and local government through my participation in Millersville Business Association sponsored events. I will follow the Code of Business Practices set forth by the Better Business Bureau and will carry out ethical business practices.

Signature:

Date:

(Please Sign)

Membership Level: (Please indicate):

- I opt out & will NOT participate in the MBA sign on Manor Avenue. In other words, I will not include my business info on the large white board as per a schedule set-up by MBA. [Check only if you do NOT wish to participate.]

\$200 Executive Membership

\$100 Membership

Make Checks payable to: Millersville Business Association

Once Completed, Please mail this form and accompanying check to:

P.O. Box 133
Millersville, PA 17551

For additional questions, contact Steve DiGuseppe, MBA Vice President (weekdays):
717-871-5627 or steven.diguseppe@millersville.edu

NOTE

Membership is for the calendar year of January 1 - December 31, 2017.

Membership Dues Deadline
December 31, 2016