



NEW MEMBER APPLICATION

YOUR NAME: _____

ELIGIBILITY FOR MEMBERSHIP

- I OWN OR REPRESENT A BUSINESS IN THE POINT PLACE/SHORELAND COMMUNITY
- I OWN OR REPRESENT A BUSINESS AND LIVE IN THE POINT PLACE/SHORELAND COMMUNITY
- OTHER _____

ORGANIZATION INFORMATION (IF APPLICABLE)

ORGANIZATION _____
YOUR TITLE _____
BUSINESS ADDRESS _____
CITY, STATE, ZIP _____
BUSINESS PHONE _____
BUSINESS FAX _____
YEARS IN BUSINESS _____

PERSONAL INFORMATION

YOUR NAME _____
EMAIL _____
ADDRESS _____
CITY, STATE, ZIP _____
PERSONAL PHONE _____
DATE OF BIRTH _____

I WOULD LIKE TO RECEIVE MY PPBA MAIL AT:

- BUSINESS HOME

DESCRIPTION OF YOUR BUSINESS OR ORGANIZATION

I WOULD LIKE TO PARTICIPATE IN THE FOLLOWING ACTIVITIES AND EVENTS

- | | | |
|--|---|---|
| <input type="checkbox"/> BANQUET | <input type="checkbox"/> ECONOMIC DEVELOPMENT | <input type="checkbox"/> SCHOLARSHIP FOUNDATION |
| <input type="checkbox"/> BEAUTIFICATION | <input type="checkbox"/> GOLF OUTING | <input type="checkbox"/> TRAFFIC & SAFETY |
| <input type="checkbox"/> BLOOD DRIVE | <input type="checkbox"/> MEMBERSHIP COMMITTEE | <input type="checkbox"/> WELCOME COMMITTEE |
| <input type="checkbox"/> EASTER EGG HUNT | <input type="checkbox"/> POINT PLACE DAYS | <input type="checkbox"/> COMMITTEE FORMATION |
| <input type="checkbox"/> LEGACY COMMUNITY FOUNDATION | <input type="checkbox"/> TRADE FAIR | |

- MY MAIN INTEREST IN THIS ASSOCIATION IS COMMUNITY INVOLVEMENT, ACTIVITIES & EVENTS
- MY MAIN INTEREST IN THIS ASSOCIATION IS ECONOMIC DEVELOPMENT & BUSINESS GROWTH

Thank you for your interest in the Point Place Business Association

Subject to Application approval, per Article III, Section 2, your membership includes business exposure to fellow members and advertising of your business. You will be listed in our Membership Directory that is updated annually. Dinner meetings are held the third Wednesday of every month, with dinner included as part of your membership. We focus on community activities as well as business growth and look forward to your involvement in the PPBA.

MAIL COMPLETED APPLICATION AND CHECK FOR \$125 (ANNUAL DUES) TO:

Point Place Business Association
Attention Membership
P.O. Box 5074
Toledo, Ohio 43611