

APPLICATION FOR MEMBERSHIP IN THE  
**Valley Springs**  
 Area Business Association

**Want to Join the Valley Springs Area Business Association  
 in Three Easy Steps!**

**STEP 1**

Fill out this section completely:

Date _____	In Operation Since _____
Business Name _____	Area(s) Served _____
Contact Name _____	No. of Employees _____
Title _____	Services/products offered _____
Informal Name Preference _____	_____
Address _____	_____
City _____ St _____ Zip _____	_____
Mailing Address _____	Valley Springs ABA directory business category (s) _____
City _____ St _____ Zip _____	_____
Phone ( _____ ) _____	How did you learn about the VSABA? _____
Fax ( _____ ) _____	_____
Email Address _____	Signature _____
Website _____	If Referred Name of VSABA Member _____

**STEP 2**

	Membership: Business \$30 _____	
Please Check One	Associate (Individual) \$20 _____	Membership Fee \$ _____
	Past Citizen of Year \$10 _____	

TOTAL \$ \_\_\_\_\_

Determine your annual membership dues based on business membership classification

**METHOD OF PAYMENT:**

Check Enclosed: *Payable to Valley Springs Area Business Association*

Credit Card:  Visa  MC  AmEx

Credit Card No. \_\_\_\_\_

Expiration Date \_\_\_\_\_ CVV \_\_\_\_\_

Cardholder's Name \_\_\_\_\_

PLEASE PRINT

Signature \_\_\_\_\_

The Valley Springs ABA is a non-profit organization.

**STEP 3**

Fax or mail this application to:

**FAX COMPLETED FORM TO**  
**(866) 712-9316**

**OR MAIL TO**  
 Valley Springs Area Business Association  
 P O Box 848  
 Valley Springs, CA 95252