

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 Associate (Individual) \$20 _____ Membership Fee \$ _____
Check One 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