

GREATER PRESTON BUSINESS ASSOCIATION

Promoting Business and Community interests of Franklin County

MEMBERSHIP APPLICATION

Company Name: _____

Designated Representative: _____

Title: _____

Street Address: _____

City, State, Zip Code: _____

Telephone: _____ Other Phone: _____ Fax: _____

E-mail Address: _____

Web Site Address: _____

Business Description: _____

Circle Business Category(ies) (first category is free on GPBA Web Site, additional are \$20 per year)

Agriculture & Animals

Automotive

Communications

Construction

Dining

Education & Daycare

Financial Services

Health

Industry

Lodging

Organizations

Professional Services

Real Estate

Recreation

Service & Utilities

Shopping

What are your reasons and expectations for joining?

GPBA members are required to be in compliance with all applicable state and local licensing laws and regulations.

Signature of Designated Representative _____ Date Payment Method: Check (to "GPBA")
Credit Card (online)

Annual Membership Dues (General & Affiliate: \$100.00): _____

Annual additional Business Categories for Web Site: \$ **20.00** each: _____

TOTAL: _____

*Please mail this application to GPBA, P.O. Box 552, Preston, ID 83263
208-852-2403 Thank you!*

www.prestonidaho.org