



Bath Business Association

Membership Application _____ **New Member** _____ **Renewal**

Business name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____

Email: _____

I prefer to receive: Email _____ Regular Mail _____ (please check one)

I do _____ do not _____ wish to be included in the BBA Website member listings.
(please check one).

Type of Business (to appear in Website listing): _____

Comments: _____

Authorized Representative: _____ Date: _____

Print Name: _____

Annual Dues - \$30.00

Annual dues are payable by December 31 of each year.

For additional information, call Nancy Fay at 330.666.3347 or email Susan Abramson at shabramson@att.net. Please reference "BBA" in your emails.

Bath Business Association

P.O. Box 422

Bath, Ohio 44210-0422

www.BathBusinessAssociation.com