



LaSalle Business Association
 777 Highway 18 Mailbox 40 LaSalle, ON N9H 3S8

Membership Application
 (Membership expires December 31)

Business Information (Please verify)

Company:	Phone:	Into DB: _____
Address :	Fax:	Renewed: _____
City / Prov :	Email:	Expires: _____
Postal Code:	Website:	

<p>Business Description:</p> <p>Interested in Advertising ?</p>	<p>Membership Type: _____ Options: LaSalle Business or Associate</p> <p>Business Type: _____ Options: Store/Office Front, Home Based, Manufacturer or Marina</p> <p>Category: _____ (maybe changed at discretion of LBA)</p>
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Owners / Partners / Managers / Others

Name	Position	Phone	Cell
1.			
2.			
3.			
4.			

I / We have read, understand and accept the **Privacy Policy and Code of Ethics posted on our website www.lasallebusiness.ca** and agree by the Guidelines set forth in the posted documents.

Signature: _____ Date: _____

Please return **Membership Application with Payment** and Two Business Cards.

Thank you for supporting the LaSalle Business Association.

Helping your Organization : To Build a strong Business Association volunteer on sub-committees.
 Please **Circle** your preference(s) or area(s) of interest:

Publicity / New Directory / Education / Social / eNewsletter / Website / Policies and Procedures /
 Community Liaison / Government & Muncpal Affairs / Awards Program / Other .

Other Comments:

LBA Office Use Only. New Member Renewal

Date Rec'd : _____ Cash / MO / Cheque # _____ Date: _____ Amount \$ _____