



Greater Blairstown Business Association (GBBA)

Annual Membership Application

Business Name: _____

Owner's Name: _____

Representative's Name: _____

Business Address: _____

Mailing Address: _____

Please list the following address on the website: Business Mailing None

Telephone: _____ Fax: _____

Email: _____

Website URL: _____

Brief Business Description:

1. Regular Member – Any for-profit organization or business. **\$100.00**

2. Non-Profit Member - Any organization that is listed as a non-profit. **\$75.00**

3. Second Business - Register your additional business(es). **\$50/additional business**

4. Student Member – Over 18 and under 26, full time student. **\$50.00**

I would be interested in serving on the following committee(s):

Scholarship_____ Marketing_____ Events_____ Membership _____

How did you hear about us?

Please make checks payable to: Greater Blairstown Business Association and send to P.O. Box 398, Blairstown NJ, 07825. This form is also [available online](#) with PayPal credit payment option.

For further information about the GBBA membership please contact Jeanette Iurato, our Membership Chair, at 973-934-2548 or email info@shopGBBA.com.