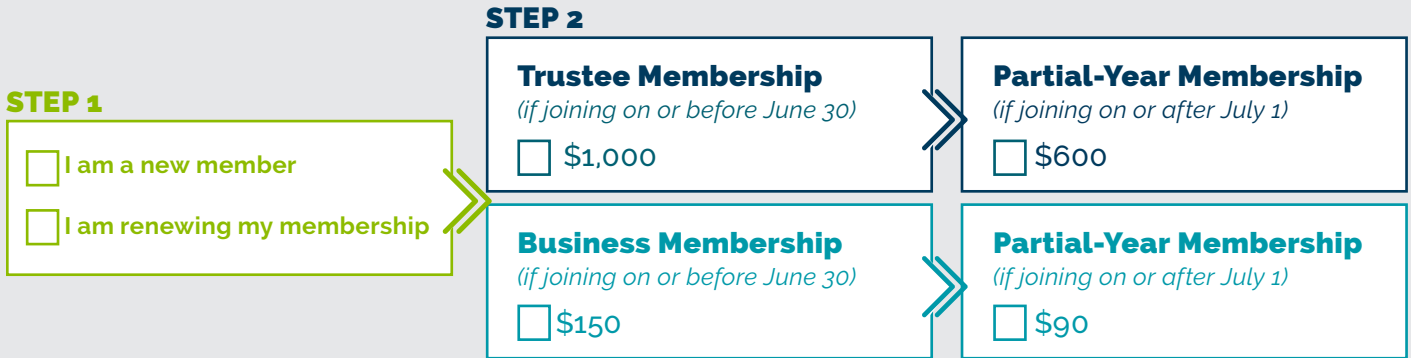


MEMBERSHIP APPLICATION



STEP 3 Send application and make check out to: **Palmetto Bay Business Association**
 c/o Treasurer – Membership Dues
 P.O. Box 56-2766, Miami, FL 33256

STEP 4

.....
 Primary Member Name *(first, last)*

.....
 Title

..... Company Industry
..... Email Website

.....
 Business Street Address

..... Office Phone Cell Phone
-----------------------	---------------------

.....
 Date

Credit Card *(online or in-person)*
 Check
 Cash
 Payment method

Please list additional team members who may attend on behalf of your company/organization
(use reverse side of this form if more space is needed):

..... Secondary Member 1 Email
..... Secondary Member 2 Email

Thank You For Your Membership!
 Please invite your friends or business associates to join our organization.