## **Utica Merchants Association**

Membership Application

Business	s Name:		
Type of E	Business		
Contact Person:		none Number: (	_)
Address:	·		
City:	State:	Zip Code:	
Email Ad	ddress:		
Website:			
Member	ship Type:		
M	erchant/Organization Member - \$50.00	New * _	Renewing **
As	ssociate Member (Non-Merchant) - \$35.00	New * _	Renewing **
	ote: Merchant/Organization listed on the Utica ith your membership	ı Merchants Assoc. w	ebpage is included
	<ul> <li>If you are a new member and desire to had locate, complete, and submit the Utica M</li> </ul>		· •
	<ul> <li>If you are renewing your current member new Utica Merchants Assoc. website form</li> </ul>	•	•
Date:	Amount remitted: \$		

Please remit these forms and dues to:

Lori Tabler, P.O. Box 486 Utica, OH 43080

Please make checks payable to Utica Merchants Association