

Utica Merchants Association

Membership Application

Visit us online at: www.UticaMerchantsAssociation.com

Business Name: _____

Type of Business: _____

Contact Person: _____ Phone Number: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone Number: _____ Fax Number: _____

Email Address: _____

Website: _____

Interested in joining a committee? Yes ___ No ___ Not at this time ___

List your interests, ideas, or concerns:

Membership Types:

Merchant Member - \$40/year

___ New* ___ Renewing**

Associate Member (Non-Merchant) - \$25/year

___ New* ___ Renewing**

Business Listed on Utica Merchants Webpage Included with Membership.

*New members complete the following Utica Merchants Association website form.

**Renewing members complete the form only if you wish to have changes to your business listing.

Date: _____ Amount Paid: _____

Once these forms are completed please mail to:
Lori Tabler, P.O. Box 486 Utica, Ohio 43080

Utica Merchants Association Website Form

To qualify for an entry on the Utica Ohio Merchants Website, you have to become a member or an associate member.

Proprietor (if applicable) _____

Business Name _____

Type of Business _____

Contact Person _____

Address _____

Business Telephone _____

Website Address _____

E-mail Address _____

Days Open: Monday Tuesday Wednesday Thursday Friday Saturday Sunday

Hours Open: Monday _____ Tuesday _____ Wednesday _____

Thursday _____ Friday _____ Saturday _____ Sunday _____

Location _____

Business Description: _____

(If more room is needed please use back of form or attach another sheet of paper)

Special Features:

Other:

If you would like a photo of your business on your website contact, or email a picture to james.quinif@emf-websolutions.com

If you have further questions please visit www.UticaMerchantsAssociation.com

Once these forms are completed please mail to:

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