

**UPTOWN PARTNERS BUSINESS ASSOCIATION
APPLICATION FOR MEMBERSHIP**

BUSINESS INFORMATION

Business Name:
dba (if applicable):

Business Type:	<input type="checkbox"/> Retail	<input type="checkbox"/> Manufacturing	<input type="checkbox"/> Service	<input type="checkbox"/> Non-Profit
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Current address:

City:	State:	ZIP Code:
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Number of Employees: _____	Phone No.:	Website:
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BUSINESS CONTACT INFORMATION

Contact Name:

Address:	Title:
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City:	State	Zip Code
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Office Phone:	E-mail:	Fax:
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Additional Contact Name:

Title:

Office Phone:	E-mail:	Fax:
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UPBA MEMBER DUES

- | | | |
|--|---|---|
| <input type="checkbox"/> \$125: Sole Proprietor | <input type="checkbox"/> \$250: 11-25 employees | <input type="checkbox"/> \$500: 101+ employees |
| <input type="checkbox"/> \$150: 2-5 employees | <input type="checkbox"/> \$300: 26-50 employees | <input type="checkbox"/> \$150: nonprofit institutions |
| <input type="checkbox"/> \$200: 6-10 employees | <input type="checkbox"/> \$400: 51-100 employees | <input type="checkbox"/> \$100: government entities |

- \$100:** Supporting Member – a business or organization **NOT** located in the Uptown geography

APPLICATION FEE: \$25

This one time fee will be waived if the organization is already a dues paying member of another existing membership organization located in one of the Uptown neighborhoods i.e. Shaker Square Area Dvpt. Corp.

COMMITTEE PREFERENCE

- Marketing Membership Safety

**MAIL TO: Laura Kleinman
University Circle Inc.
10831 Magnolia Drive
Cleveland, OH 44106**

PLEASE MAKE CHECK PAYABLE TO: UNIVERSITY CIRCLE INC.

Membership Dues: _____
One Time Application Fee: \$ 25.00
Total Due: _____

If Application fee is waived, please provide name of organization located in Uptown to which you already pay dues _____