

## **Home-based Business Membership Application**

(Home MUST be in Barrhaven and business MUST be Ontario Registered with a Master Business Number)

		Company	Information	
Business Name & Ca	ategory:			
Address:				
	St	reet Address		
		City	Province	e Postal Code
Work Phone: (	)		Fax: <u>(</u> )	
E-mail Address:		Facebook Page:		
Website:				
		Representati	ve Information	
N		-		
Name:			Title:	
Cellular		Telep	hone:	
Email:	Signature:			
		General I	May nformation	we contact you by email?
Reason for Joining:				
r todoon for commig.				
How would you like the BBIA assist you				
as a business owner?				
owner:				
Are you interested				
in attending a meeting?	Yes / No			

**Note:** Home-based businesses are full *voting* members of the Barrhaven Business Improvement Area and will be listed on our web directory. Pleased send us a jpeg file of your logo.

As with our commercial-based business members, each home-based business will have only **one vote** by a designated representative of that business, regardless of the number of employees/owners.

The annual donation fee \$250.00 is due in full at the time of application in order for your membership to be processed. Cheques should be made to BBIA please. Your membership expires on December 31<sup>st</sup>.