



Membership Application
\$100 Annually

Business Name: _____

Contact Person: _____

Mailing Address: _____

Business Address: _____

Do you want your business address to be published with your membership? Yes No

Business Phone: _____ Business Hours: _____

Cell Phone: _____ Best time to contact you: _____

Which telephone number is preferable for contact? (please check one)

Business email: _____ Personal email: _____

Which email is preferable for contact? (please check one) Business: _____ Personal: _____

Business Category: _____

Is your business operated from home? Yes _____ No _____

How many years have you been in business? _____

Skills you would share that might benefit the PVBN _____

Please select committee(s) that you would be interested in serving on:

_____ Membership

_____ Events

_____ Education/Speakers

_____ Advocacy

Once you complete this form click on the "Proceed to PayPal" button below and you will be able to pay your annual dues online or if you don't want to pay online please print and send the completed membership application along with your dues to the following address:

Putnam Valley Business Network, Inc.

P.O. Box 168

Putnam Valley, NY, 10579

845 809-4616

Secure Payments
by

PayPal

