

Membership Application

Information:

Name: _____

Company Name: _____

Address: _____

Phone: _____ Fax: _____

E-mail: _____ Birthday: _____

Comment: _____

Levels: (based on number full time employees)

Businesses Level

- Sponsorship \$500+
- Large Business: (9+) \$300
- Medium Business: (5-8) \$200
- Small Business: (1-4) \$100
- Non-profit: \$75

Community Level

- Individual: \$25 (1 discount card)
- Family: \$45 (2 discount cards)

- Yes, I am interested in volunteering.
- Yes, I am interested in receiving e-mail updates about downtown.
- Yes, I am interested in receiving 2 free editions of West Georgia Living from the Times Georgian.

Total amount enclosed: _____

Thanks for your support!

Please return application and payment to: Main Street Program
115 Rome St
Carrollton, GA 30117