



Home-based Business Membership Application 2009 (Home *must* be in Barrhaven)

Company Information

Business Name & Category: _____

Address: _____
Street Address

_____ *City* _____ *Province* _____ *Postal Code*

Work Phone: () _____ Fax: () _____

E-mail Address: _____

Website: _____

Representative Information

Name: _____ Title: _____

Cellular _____ Telephone: _____

Email: _____ Signature: _____

May we contact you by email?

General Information

Reason for Joining: _____

How would you like the BBIA assist you as a business 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.

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 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, 2009.

Paid in full: **BBIA Signature:** _____

Date: _____