

**Somerville Business and Professional Association**



139 Sycamore Ave  
Bridgewater, NJ 08807  
908-725-1893  
info@somervillebiz.org  
www.somervillebiz.org

**MEMBERSHIP APPLICATION**

*Membership Dues \$150 per year*

Business name \_\_\_\_\_

Corporate Name (if different) \_\_\_\_\_

Street Address \_\_\_\_\_

Telephone \_\_\_\_\_

Fax: \_\_\_\_\_

Email \_\_\_\_\_

Website \_\_\_\_\_

Primary Contact Person: \_\_\_\_\_ Title: \_\_\_\_\_

Secondary Contact Person: \_\_\_\_\_

Title: \_\_\_\_\_

Please describe the nature of your business: \_\_\_\_\_

Usual Business Hours: \_\_\_\_\_

Signed by: \_\_\_\_\_ Date: \_\_\_\_\_

*Please mail completed application and payment to the association at the address above.*

***Thank you and welcome to the Somerville Business and Professional Association!***