



2024 MEMBERSHIP APPLICATION

Renewing Member

New Member

Business / Organization Membership \$75.00

DIRECTORY LISTING INFORMATION

(You may join anytime, but for inclusion in printed directory please mail your application in ASAP)

Business Name: _____

Mailing Address: _____

Physical Address: _____

Phone: _____ Email: _____

Website: _____

Directory Category: _____

SABA MEMBER CONTACT INFORMATION

Contact Person: _____ Title: _____

Mailing Address: _____

Phone: _____ Email: _____

YES! Please accept my Donation in the amount of \$_____ for the Scholarship Fund
(Please make a separate check out for Scholarship Fund donations with "Scholarship in Memo section)

SABA is run by member volunteers. In order to operate effectively, we need your help.
Please indicate the areas you would be interested in participating in by checking the box next to it:

Board Member

Marketing Committee

Scholarship Committee

Mingle on Main

Holiday Parade

Other Events

**Mail with your application and check to
Saxonburg Area Business Association (SABA) P.O. Box 542, Saxonburg, Pennsylvania 16056**