



# 2025 MEMBERSHIP APPLICATION

Renewing Member       New Member

Date: \_\_\_\_\_

**Business / Organization Membership \$75.00**

**DIRECTORY LISTING INFORMATION Please fill out completely even if info is same as last year**  
(You may join anytime, but for inclusion in printed directory please mail your application in by **JANUARY 31, 2025**)

Business Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Physical Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Website: \_\_\_\_\_

Directory Category (please check only one category):

- |  |   |  |
|--|---|--|
| <input type="checkbox"/> Professional Services | <input type="checkbox"/> Food & Beverage  | <input type="checkbox"/> Home Services   |
| <input type="checkbox"/> Non-profit/Community  | <input type="checkbox"/> Retail/Wholesale | <input type="checkbox"/> Health/Wellness |
| <input type="checkbox"/> Other                 |   |  |

## **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:

- |   |  |  |
|---|--|--|
| <input type="checkbox"/> Board Member   | <input type="checkbox"/> Marketing Committee | <input type="checkbox"/> Scholarship Committee |
| <input type="checkbox"/> Mingle on Main | <input type="checkbox"/> Holiday Parade      | <input type="checkbox"/> Other Events          |

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

**SABA Board: please log date when application was received : \_\_\_\_ / \_\_\_\_ / \_\_\_\_ .**