



## Annual Membership Application / Renewal

Please complete application/renewal form and mail with the annual dues to IBCA (address below)

**Application Type:**  New Membership  Membership Renewal

**Membership Type:**  Business Owner - \$35  Business Rep. - \$35  
 Government - \$35  Community Resident - \$15  
 Non-Profit - \$15

**Business Type:**  Construction  Government Agency  
 Professional  Retail  
 Restaurant  Other

**Committee Interest:**  City Beautification  Events  
 Fund Raising  Membership  
 Marketing  Welcome Committee

**Name:** \_\_\_\_\_

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

**Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip Code:** \_\_\_\_\_

**Home Phone:** \_\_\_\_\_ **Business Phone:** \_\_\_\_\_

**Date Business Started (Month & Year)** \_\_\_\_\_

**Email Address:** \_\_\_\_\_

**Web Site Address:** \_\_\_\_\_

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_ **Amt. Paid:** \_\_\_\_\_