



## Business Membership Application Form

*Little Falls Village is a non-profit membership organization helping our older neighbors “age in place”, enjoy life, and remain independent in their own homes by providing assistance and social programs.*

Name of business \_\_\_\_\_

Address \_\_\_\_\_

Email \_\_\_\_\_

Telephone \_\_\_\_\_

Name of person who will coordinate with Little Falls Village \_\_\_\_\_

Email of person who will coordinate with Little Falls Village \_\_\_\_\_

Telephone of person who will coordinate with Little Falls Village \_\_\_\_\_

\_\_\_\_\_  
*Become a Business Member and put the name of your business (with link to your website) on our website, weekly “doings!” events calendar, quarterly “Village Voice” newsletter, the Village Directory, and our Annual Report. These email publications reach 180 Little Falls Village members and volunteers directly. Many more receive our publications from friends of via the various neighborhood list serves. Little Falls Village serves seniors in the same community that your business serves; zip code 20816. Little Falls Village is able to provide greater visibility for your business by adding a logo link to our publications, signage at village events, special program sponsor recognitions, etc.*

\_\_\_\_ Yes, we would like to become Business Members and be listed on your website and in your publications with our website link for one year. Our check is enclosed for \$100 made out to Little Falls Village and mailed in the enclosed envelope.

\_\_\_\_ Yes, we would like our company logo displayed on your website and e-publications with our website link for one year. Our check for \$200 is enclosed.

\_\_\_\_ We are interested but uncertain. Please contact us to provide more information.

\_\_\_\_ We would like to discuss placing an advertisement in your online and print products.

\_\_\_\_ Please contact us to *discuss timing and placement.*

