



2009 Membership Form & Invoice

The Alameda Business Association

1 Please complete with your information.

Company Name _____

Name of Contact Person _____

The contact is a: Business Owner Property Owner Manager/Representative

Contact Email _____ Contact ☎ Number _____

Public Email _____ Business ☎ Number _____
(if different) (if different)

Address _____

Website _____

Type of Business: Accounting Attorneys Financial/Investments
 Health and Wellness Hotels Insurance
 Non-Profit & Associations Restaurant Property Management
 Real Estate Services Specialty Shops
 Other _____

Please indicate if you have a specific ABA project interest:

Street, Building, & Traffic Improvements Marketing Projects
 Festivals, & Parades Membership "Brown Bag" Lunches
& Open House Events

2 Please enclose your payment with this invoice.

Please make all checks payable to: Alameda Business Association.

QUANTITY	DESCRIPTION	UNIT PRICE	AMOUNT
1	ABA Membership (New or Renewal)	75.00	\$ 75.00
	Subtotal		75.00
	Sales Tax		0.00
	Total Due		\$ 75.00

3 Mail this completed form and payment.

Mail this completed form and payment to: The Alameda Business Association, 919 The Alameda, San Jose, CA 95126.
If you have any questions concerning this invoice, contact Larry Clark at 408.436.8581.