(MAIL-IN REGISTRATION FORM)

Business Name: _____

Owner/Contact Person: _____

Business Address: _____

_____

_____

Email: _____

Phone #: _____

Website: _____

Facebook: _____

Brief Description of Business: _____

_____

_____

Do you wish to have your business listed on our website? ____ Yes ____ No

Do you wish to have a link to your website/Facebook site? ____ Yes ____ No

Do you wish to have your email listed on our website? ____ Yes ____ No

Do you wish to have your business featured in our Business of the Month section. This would involve a short videotaped interview. ____ Yes ____ No

The cost of the Northside Business Membership is $250.00. Please make out your check to the *Northside Neighborhood Association* and send to:

Northside Neighborhood Association
PO Box 888
Lexington, KY 40508