MEMBERSHIP APPLICATION / INVOICE

MEMBERSH APPLICATION	
Name: Name of Business /Organization (if applicable): Address of Business/Organization: Mailing Address (if different than above): City: E-mail:	State: Zip Code: (important for communication) Home Phone:
ANNUAL MEMBERSHIP RATES Business Membership 1-10 employees \$100 11-50 employees \$175 51 or more employees \$275 Non-Franklin businesses please add \$75 to above rate Non-Business Membership Residents \$25 Students & Senior Citizens \$15	Add Your Website Link (If you are new or would like to add your company link on the FDP website, please check above and write your URL in the space provided.)
If you would like to be an active participant We invite you to be as active and involved a Yes, I would like to be a volunteer at Economic Development/Design	
for funding our events. The Partnershi businesses interested in revitalizing D	ayment. Please mail & make checks payable to: 13, Franklin, MA 02038.
Signature:	Date: