

## Membership Application HOCKESSIN BUSINESS ASSOCIATION

1170 Old Lancaster Pike, Hockessin, DE 19707

E-mail: HockessinBusiness.HBA@gmail.com Website: HockessinBusinessAssociation.com

Application Date:			
Business Name:			
Company Name (if different from al	oove):		
Owner/President:			
Business Address: Street:			Suite:
City: Hockessin	State: DE		Zip: 19707
Mailing Address (if different from	n above): Street:		_
City:		State:	Zip:
Business Phone:	Business Fax:		
Business Email:			
Business Web site:			
Key HBA Contact:			
Key Contact Phone:	Alternate Phone		
Key Contact Email:			

## Aside from being part of a strong business community, benefits include:

- Shared Marketing, Business Maps, Destination Hockessin, a presence on HBA social media sites, etc.
- Community Event Participation: Second Saturday, 4th of July, Trick or Treat in Hockessin...
- Networking at monthly meetings, yearly Open House Event...

## Which category best describes your business (for identification on HBA Map)

🗆 Eat	🗆 Shop	Experience
Automo	tive, Home & Clean	ning Services

- □ Financial Services
- Personal Services

- **Or one of the following Services:** Education and Childcare
- □ Health & Fitness Services
- Professional Services

Brief Description of Products or Services:

Membership Dues: \$120.00 annually, due on October 1st. Members joining mid-year will pay a pro-rated amount of \$10/month for the period of the year remaining.

Please mail this completed form along with a check to the above address.

Eligibility requirements: Your business must fall within a three mile radius of The Village of Hockessin. Upon acceptance, the company named is entitled to all benefits of the HBA.

Signature

**Print Name and Title** 

Thank you for joining the HBA! Please ask about our Committee Involvement Opportunities