



P. O. Box 5, Haddon Heights, NJ 08035
www.haddonheights.biz

MEMBERSHIP REGISTRATION FORM

(Membership Year is October 1 – September 30)

Renewal **New** **Check attached**

Business Name: _____
Business Address: _____

Contact Name(s): _____
Phone: _____ **Cell:** _____ **Fax:** _____
Email Address: _____
Website Address: _____
Facebook URL: _____

Business Category for Calendar & Website Listing (please check one):

- Construction & Trade Services**
- Medical Services**
- Restaurants – Food**
- Financial Services**
- Personal Services**
- Retail**
- Legal Services**
- Professional Services**
- Specialty Services**
- Marketing Services**
- Real Estate Services**
- Wellness Services**
- Other (please describe):**

Please check off your areas of interest:

- Business District Captain**
- Holiday Activities**
- Community Celebration Calendar**
- Marketing – Public Relations - Communications**
- Fall Festival**
- Membership**
- Government Relations**
- Officer or Board Member**
- Other (below):**
- Website – Facebook**

Please return this form with your payment for \$75 to HHBPA, P.O. Box 5, Haddon Heights, NJ 08035 or deliver to the Village Cheese Shop by SEP 25. Non-Profit Associate Membership is \$25. New members joining in JUN-AUG are good through SEP 30 of the following year.