FREEDOM BUSINESS ASSOCIATION, INC

Membership Application

Name of Business: _____

Address: _____

_____

Mailing Address: _____

(If Different) _____

Phone Number: _____

Fax Number: _____

E-Mail: _____

Contact Person(s) and Title(s):

_____

_____

Please remit $40.00 to: Freedom Business Association
N3989 Washington Avenue
Freedom, WI 54130

If you have any questions, please contact:
Bob Van Eperen at 687-1551
Or
Jim Ver Voort at 687-2250