



Market Ashland Partnership (MAP)

Post Office Box 942 • Ashland, Virginia 23005 • www.shopashlandfirst.com

Membership Application

Please print this form, fill it out and mail to the above address ... Attention Membership

Business _____

Contact _____

Address _____

City _____ State _____ Zip _____

Phone _____ Fax _____

E-mail _____

Referring Member _____

Type of Business

<input type="checkbox"/> CM-Communications	<input type="checkbox"/> IN-Insurance	<input type="checkbox"/> RS-Restaurant
<input type="checkbox"/> FI-Financial	<input type="checkbox"/> MA-Manufacturing	<input type="checkbox"/> RT-Retail
<input type="checkbox"/> GA -Gov't/Non-Profit	<input type="checkbox"/> MI-Miscellaneous	<input type="checkbox"/> SV-Service
<input type="checkbox"/> HO-Hotel/Motel	<input type="checkbox"/> RE-Real Estate	

Please consider volunteering to help with any of the following:

Committees

Event Chairs and Helpers

- | | | |
|---|---|---|
| <input type="checkbox"/> Membership | <input type="checkbox"/> Strawberry Faire | <input type="checkbox"/> Enjoy Ashland Day |
| <input type="checkbox"/> Marketing/Events | <input type="checkbox"/> Golf Tournament | <input type="checkbox"/> MAP Socials |
| <input type="checkbox"/> Member Benefits | <input type="checkbox"/> Elementary School Supplies | <input type="checkbox"/> Santa Luncheon |
| <input type="checkbox"/> Government Affairs | <input type="checkbox"/> Christmas Parade | <input type="checkbox"/> 4 th of July Parade |
| <input type="checkbox"/> Town Gown | | |

For any question please contact Michele Herbert 752.2103 micheleherbert@verizon.net

ANNUAL DUES ARE \$75.00 (January – December)

Please make check payable to MAP

Your Name: _____ Title: _____
(Please type or print)

Signature: _____ Date: _____

By joining, I agree to accept emails and other correspondence related to MAP membership

Together we can make a difference.