



Fitchburg Local First

Membership Application

Business Name: _____

Address: _____

Phone: _____ Fax: _____

Email: _____ Web Address: _____

Owner/Principal: _____ Alternate Contact: _____

Neighborhood or Square: _____

Type of Business: _____

Product(s): _____

Please circle either yes or no when answering the following qualifying questions about your business. In order to qualify for membership you must be able to circle yes to all questions below:

1. My business is independent and privately held (not publicly traded). **YES** NO
2. The business is located in our community and 50% or more of the business ownership lives in our state. **YES** NO
3. My business is based locally and has no corporate or national headquarters outside the state. **YES** NO
4. My business can make independent decision regarding the name and look of the business, as well as all business purchasing practices and distribution. **YES** NO
5. My business pays all marketing, rent, and other business expenses without assistance from a corporate headquarters. **YES** NO

As part of membership, you will be listed on the Fitchburg Local First web site. Would you like to have a link from Local First to your website? **YES** NO

If yes, would you put a Local First web link on your website? **YES** NO

Please indicate a principal category listing for your business (hardware, book, gift, etc)

I enclose my annual membership fee. I would like to join at this level:

- Founding Member – \$100 (Listed on the web site and in the Local First Directory)
- Sponsoring Member – \$500
- Non-Business Affiliate Member – \$50

Total Enclosed: \$_____ Mail to: **Fitchburg Local First**, 408 River Street, Fitchburg, MA 01420