



Leominster Small Business Association Membership Form

Company Name: _____

Street: _____

Leominster, Ma 01453

Company website: _____

Main Phone Number: () _____ - _____ Fax Number: () _____ - _____

Primary contact name: _____ Title: _____

Business phone: _____ Email: _____

_____ check here to **not** be added to the mayor's email distribution list

Hours of operation:

Monday _____ to _____ Tuesday _____ to _____ Sunday _____ to _____

Wednesday _____ to _____ Thursday _____ to _____

Friday _____ to _____ Saturday _____ to _____

Send Attachments to: membership@shoplocaleominster.com

Company Logo: Acceptable formats for pictures and logos: .jpg, .gif, .png, .bmp, pdf

Logo can be any size we will size appropriately.

PHOTOS: You can include up to 4 photos for your company. This could be outside shots, products, employees, equipment etc.

About Your Company: Tell us about your business, this can be as long or short as you would like.

- Company history, how long have you been in business, how did you get started?
- What products do you sell or what service do you offer?
- What is your specialty?
- What makes you different?
- Why did you choose Leominster for your business?

Please let us know what you would like to see your association do for you the business owner.

Leominster Small Business Association