



"All Roads Lead to Rouzerville"

PO Box 304
Rouzerville, PA 17250

Membership Application

Date _____

Business/Organization _____

Contact Person _____

Title _____

Address _____

City _____ State _____ Zip _____

Phone _____ Cell _____

Fax _____ Email _____

Website _____

Description of Business

Please provide a brief description of your business, products, services, and any other pertinent information to help the association properly promote your business.

Authorized Signature _____

Annual Dues \$100 attached _____