

MARBLEHEAD LIGHTHOUSE HISTORICAL SOCIETY



APPLICATION FORM
BUSINESS MEMBERSHIP
\$35.00

Date _____

Business Name _____

Mailing Address _____

City, State, Zip _____

Telephone _____

E-mail _____

As a current business member, we are offering to mention your business on our site with “no additional charge” to you.

PLEASE NOTE: The information provided below will appear on the site. Omit individual contact names unless you want ALL visitors to contact that person specifically. Also, please provide a physical address. PO Boxes will not help customers find you. (We will not change the way we mail information to you.)

Please print as clearly as possible.

Company Name: _____

Contact Name (optional): _____

Street Address: _____

City: _____

State: _____

Zip: _____

Phone (optional): _____

Website (optional): _____

Email Address (optional): _____

Type of business, services you provide, or 2-3 sentences that describe your business: _____

Please print your full name & title below authorizing us to publish your business' information above (this will not appear on the site):

Name: _____ Title _____

MAKE CHECKS PAYABLE TO AND MAIL TO:

Marblehead Lighthouse Historical Society

PO Box 144

Marblehead, Ohio 43440