



Membership Renewal Form

Business Name: _____

Owner: _____

Address: _____

Email Address: _____

Website: _____

Phone Number: _____

Brief 3 line description of your business:

(This will be used in your listing on our FPMA website) _____

Annual Dues: \$100

Due: January 1, 2009

- Pay on-line at www.fairportmerchants.com

Click on the Membership Application icon, and click on the payment link.

Or

- Checks should be made payable to FPMA Inc.
And mailed together with this invoice to:

FPMA Inc.
6 North Main Street
Fairport, NY 14450-1524

***Any renewals received after
1/31/09 can not be included
in the 2009 FPMA
Merchant Brochure.
No Exceptions.***

The Success of the Association relies on the talents and time of our members. Please indicate an area(s) below where you feel your talents could be best utilized.

Cruz Nites Fairport Canal Days Membership Holiday Promotions Spring Cleanup
 Scarecrow Fest Publicity Phone Tree Merchant Publications & Marketing

Please return this invoice with your payment.

Questions? Leave a voice mail on FPMA phone 234-4323.

Visit our website at www.fairportmerchants.com