

# MEMO

Medfield Employers & Merchants Organizations, Inc.  
 PO Box 6 – Medfield, MA 02052  
[www.medfieldmemo.org](http://www.medfieldmemo.org)

## MEMBERSHIP APPLICATION

Please complete and return with your check payable to MEMO in the amount of \$150.00 for returning members & \$75.00 for new members.

If you have any questions please contact Steve Scanlon 508-359-9737

*Please Type or Print Clearly All Information*

Business Name:		Date Business Established:	
Business Street Address:		PO Box:	
City /Town:	State:	Zip Code:	
Telephone Number:		Business Facebook page (if applicable) :	
E---Mail Address:		Website (if applicable):	
Business Category:			
(Please visit <a href="http://medfieldmemo.org/wordpress/?page_id=833">http://medfieldmemo.org/wordpress/?page_id=833</a> - for a list of categories)			
Nature of Business:		Referred By:	
		Total Number of Employees:	
Authorized Business Representative:		Representative Signature:	
Preferred Method of Contact: (Check all desired)		Representative Town of Residence:	
Postal Mail      Phone      Email			

*Membership in MEMO is contingent on approval by the MEMO Board of Directors.*

Do Not Write Below This Line. MEMO Use Only.

Date Payment Received	Check Number:
New Member:	Notes: