

City of Shively Business Association (SABA)

Membership Application

Business name: _____

Contact Person: _____

Address: _____

Telephone: _____ FAX: _____

Description of Business: _____

Please return completed application to:

Shively Area Business Association

4400 Dixie Highway

Louisville, KY 40216

Membership Dues (Check One)

() Business \$75.00

() Church/ Resident \$55.00