



## Fountain City Business & Professional Association – Member Application

Company Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Telephone: \_\_\_\_\_

Applicant Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_  
Email Address (Will not be published w/o permission): \_\_\_\_\_

(Please Check One)

- Individual       Corporation       Sole Proprietor  
 Partnership       Other (Please specify)

(Please Check One)

- New Member       Membership Renewal

My reason(s) for wanting to join are: \_\_\_\_\_

I am interested in the following committees: \_\_\_\_\_

~Some FCBPA committees include but are not limited to “Membership”, “Special Events”, and “Scholarship”. However, other committees may develop based on future needs, and projects.~

Applicant’s Signature: \_\_\_\_\_ Date: \_\_\_\_\_

*NOTE: To have your profile and contact information displayed on [www.fountaincitybusiness.com](http://www.fountaincitybusiness.com) please visit the following link <http://tinyurl.com/FCBPA-member-profile> or click “submit profile information” under the Directory Tab on the website. We do not automatically post your profile.*

Please complete this application and mail with membership fee (\$45 per year) to:  
or pay online at [www.fountaincitybusiness.com/pay](http://www.fountaincitybusiness.com/pay)

Fountain City Business & Professional Association  
Attention Membership Director  
P.O. Box 18282  
Knoxville, TN 37928-2282