

MEMBERSHIP FORM

Annual Dues

- \$100.00 [Small Business]
- \$500.00 [Chain and Larger retail]
- \$1,000.00 [Corporate and Institutional]

Name _____

Address _____

Telephone _____

E-mail Address _____ **FAX** _____

Special Concerns

Please check your particular concerns or areas of interest.

- Social/P.R. Events, Holiday Events, etc.*
- Transportation and/or Trolley Service*
- Beautification, including issues of signage, trees and landscaping, outdoor furniture, rest areas, etc.*
- Parking Problems*
- Security*
- Public Works, Street Construction and Repair*

Other areas of concern

Please return this form and your check to *University Place Association* in the enclosed envelope or mail to *University Place Association, P.O. Box 541346, Houston, Texas 77254.*