

# Member Application

## Ocala Downtown Business Alliance (DBA)

Join our effort to improve the Downtown Ocala business environment!

Application Completed By:

- Business Owner       Property Owner       Tenant       Friend of Downtown

Company Name: \_\_\_\_\_

Business Owner's Name: \_\_\_\_\_

Business Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Contact Name (if different): \_\_\_\_\_

Contact Phone: \_\_\_\_\_

Contact E-mail: \_\_\_\_\_

Company Physical Address: \_\_\_\_\_ Zip: \_\_\_\_\_

Mailing Address:

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Preferred Listing Category:

- |   |   |  |
|---|---|--|
| <input type="checkbox"/> Automotive                   | <input type="checkbox"/> Food & Dining        | <input type="checkbox"/> Real Estate         |
| <input type="checkbox"/> Building Trades              | <input type="checkbox"/> Health & Fitness     | <input type="checkbox"/> Shops & Retailers   |
| <input type="checkbox"/> Business & Professionals     | <input type="checkbox"/> Home & Garden        | <input type="checkbox"/> Sports & Recreation |
| <input type="checkbox"/> Communications & Electronics | <input type="checkbox"/> Industry             | <input type="checkbox"/> Travel & Lodging    |
| <input type="checkbox"/> Entertainment & Hobbies      | <input type="checkbox"/> Personal Services    | <input type="checkbox"/> Other: _____        |
|   | <input type="checkbox"/> Public & Non-Profits |  |

Description of Business: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Your participation will ensure a collective voice is used to improve the quality of life, attract new business, increase property values, enhance the pedestrian traffic, create new business opportunities and market the Downtown Ocala area as a destination to visit and conduct business.

What do you see as the top three highest priority needs in Downtown Ocala?

1. \_\_\_\_\_  
\_\_\_\_\_
2. \_\_\_\_\_  
\_\_\_\_\_
3. \_\_\_\_\_  
\_\_\_\_\_

Does your company benefit from events on the Downtown Square?     Yes     No

Why? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Does your company currently advertise?     Yes     No

If yes, please check all that apply:

- |                                      |                                      |  |
|--------------------------------------|--------------------------------------|--|
| <input type="checkbox"/> Newspaper   | <input type="checkbox"/> Direct Mail | <input type="checkbox"/> Signage/Banners |
| <input type="checkbox"/> Magazine    | <input type="checkbox"/> Billboards  | <input type="checkbox"/> Word of Mouth   |
| <input type="checkbox"/> Coupon Book | <input type="checkbox"/> Television  | <input type="checkbox"/> Other: _____    |
| <input type="checkbox"/> Radio       | <input type="checkbox"/> Internet    |  |

Additional Comments or Concerns: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

For questions, email: [OcalaDBA@aol.com](mailto:OcalaDBA@aol.com).

Please mail completed form with \$100 yearly membership dues to:

**Downtown Business Alliance, Inc. P.O Box 1971 Ocala, Florida 34478-1971**