

Middleburg Business & Professional Association

P.O. Box 1384
Middleburg, VA 20118

We must have this form returned with your payment in order to update our membership list and your listing on the MBPA website. You may complete this form on the MBPA website: visitmiddleburgva.com.

BUSINESS NAME: _____

CONTACT PERSON: _____

BUSINESS MAILING ADDRESS: _____

BUSINESS STREET ADDRESS: _____

DAYS/HOURS OF OPERATION: _____

TELEPHONE: _____

FAX: _____

EMAIL, please list everyone in your business who needs to receive notices:

WEBSITE: _____

DESCRIPTION OF BUSINESS (200 - 250 words): _____

In order to ensure accuracy, please complete this form even if there are no changes to your contact information or changes to your MBPA webpage.