



Downtown Development Partnership of Great Falls, Inc.
318 Central Avenue, Great Falls, MT 59401
406-727-5430

MEMBERSHIP APPLICATION

Contact Name: _____

Business Name: _____

Address: _____

Phone 1: _____ Phone 2: _____

Fax: _____ Email: _____

Investment Level: \$ _____

The Downtown Development Partnership encourages everyone interested in our mission to support the Partnership and/or its partner organizations at whatever level possible.

Minimum annual investment to be a voting member is \$200. Minimum annual investment to be a partner member is \$1,000. Annual shall be construed as the Partnership's fiscal year, which runs from July 1 to June 30.

I am interested in serving on the Board of Directors

I am interested in serving on a committee or working group

The Downtown Development Partnership Board of Directors meets on the 4th Wednesday of every month at 9am.

For DDP Use only

Date paid: _____ Check number: _____ Amount \$ _____

Date added to database: _____ By: _____

Membership expiration: _____ Member Number: _____