

APPLICATION FOR ADVERTISING

Company/Business Name: _____

Representative: _____

Address: _____

Phone number: _____

Website: _____

EELHA Member _____ Non-Member _____ Date _____

Please include two business cards and send a check for \$50.00 to:
EELHA, PO Box 102, Peconic, NY 11958

Your ad will appear in our newsletter and website www.eelha.org.

If you have any questions, please email:

pferd@optonline.net.