



The Metamora Area Business Association (MABA) consists of business persons and professional organizations serving the Metamora and Germantown Hills area. Our purpose is to promote and encourage the creation and expansion of business, and to give back to the community through local events, programs and fundraisers.

### **MABA Events & Resources**

- **Meet Your Heroes (Second Saturday in September)**  
Community event to raise funds for the Volunteer Metamora Fire Department. A full day of family fun - grilled pork chops, hose-fight competition, inflatable slides, music, \$1000 raffle, and more!
- **Metamora/Germantown Hills Prayer Breakfast (October)**  
A community gathering with inspirational song and speakers, along with community service awards presented by MABA and the Germantown Hills Chamber of Commerce (GHCC).
- **Trunk-or-Treat (Saturday before Halloween)**  
Visit the Metamora Square for a family-friendly alternative to traditional trick-or-treating.
- **A Village Christmas (First Sunday in December)**  
Step back in time as residents in full Christmas spirit converge on the Metamora Square for an afternoon visiting businesses offering free crafts, drinks, treats, and pictures with Santa.
- **Member Website: [www.metamorabusiness.com](http://www.metamorabusiness.com)**

***Join Today! Membership form on back.***

**Give Back...**An active way to give back to the community we work and live in.

**Network...**Get to know fellow business people, generate ideas, seek out business opportunities, attend monthly meetings

**Leadership...**A good tie between business and government to discuss issues and ideas

**Want to join or have questions? Contact:  
Kip DuBois at 309-367-4197 / Chris Reatherford at 309-642-6849**





**Business Information**

LEGAL BUSINESS NAME \_\_\_\_\_

DBA (IF DIFFERENT THAN ABOVE) \_\_\_\_\_

NAME OF SOLE PROPRIETOR OR PRESIDENT/CEO \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY STATE ZIP CODE

PHONE NUMBER FAX NUMBER

GENERAL E-MAIL ADDRESS <http://> WEBSITE URL

**Contact Person / Representative for Business**  
(individual who will represent the business at MABA meetings)

NAME TITLE

OFFICE PHONE CELL PHONE

E-MAIL ADDRESS \_\_\_\_\_

PLEASE DESCRIBE YOUR BUSINESS:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

The Sole Proprietor or President/CEO must sign below giving consent to membership.

SIGNATURE DATE

**- Annual Membership Dues: \$75.00 -**