

**PITKIN ADVANTAGE SAVINGS CARD**

**Participating Business Commitment Form**

Name of Business: \_\_\_\_\_

Address of Business: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Your Pitkin Advantage Card Promotion:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**I understand that my business is committing to participate in the Pitkin Advantage Savings Card program for a minimum of six (6) months. After the initial six (6) month commitment, my business can leave the program at any time with a five (5) day notice to the Pitkin Avenue BID Office.**

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**Return completed from to:**

Pitkin Avenue BID  
1572 Pitkin Avenue  
Brooklyn, NY 11212

**Or email to:**

Oliver Vega at:  
oliver@pitkinavenue.nyc