

Name:

Title:

Business Name:

Business Address:

City:

State:

Zip:

Business Phone:

Cell Phone:

Home Phone:

Email:

Website:

Category/Industry/Profession:

Business description, including your product and/or service:

Please indicate your group:

Meetings on the 3rd
Tuesday of each month

8-9 am

12 – 1 pm

I have read and agree to the terms outlined in the ChamberConnects Policy & Procedures:

Applicant Signature: _____

Date: _____

Email application to jdilley@haywoodchamber.com