



Business Membership Application

Business Name:

Business Type/Industry:

Business Address:

Website (if applicable):

Social Media Handles:

Primary Contact Information

Name:

Title/Position:

Phone Number:

Email Address:

About Your Business

1. Briefly describe your business and services:

2. What do you hope to gain from joining CommUNITY Leads?

- Networking & Referrals
- Community Involvement
- Business Development
- Collaboration Opportunities
- Other: _____

Membership Commitment

CommUNITY Leads meets every other Thursday at 11:30 AM
Location: Spaziani Catering and Food Design, 1572 Route 23 North, Butler
Lunch & Location Usage Fee: \$30.00 per meeting

- I understand and agree to the attendance and lunch commitment.
- I would like to be added to the email list and WhatsApp list for meeting updates and special opportunities.

Signature

Name (Printed):

Signature:

Date:

PLEASE EMAIL THE COMPLETED APPLICATION TO: trish.communityleads@gmail.com

THANK YOU!