

PORTER COUNTY BUSINESS LEAGUE, INC.

MEMBERSHIP APPLICATION

SELF

Name _____

Address _____

City, State _____ Zip _____

Telephone: Home _____ Work _____ Fax _____

Date of Birth _____

Have you ever been convicted of a felony? _____ a misdemeanor? _____

How did you hear about the Business League?

BUSINESS

Company Name _____

Address _____

The business is: Sole proprietor Partnership Corporation NPO LLC other _____

Title or Position _____

Major Responsibilities _____

Do you work this business full-time? _____ Dates of Employment _____

Length of time in this profession/industry _____

Product or Service:

What other businesses are you associated with?

List other types of jobs and work experiences.

Please state your business objectives and how they relate to business in Porter County.

What do you hope to gain professionally by becoming a member of the Business League?

EDUCATION

Name of high school _____

