



2008–2009 MV Business Women's Network
Membership Application/Renewal Form

Please fill all information in clearly; this is exactly what we put in the directory!

TODAY'S DATE ____ / ____ / ____

TYPE OF MEMBER - SELECT ONE AND COMPLETE DATE; MONTH/YEAR.

New Member Renewal Member Associate Member

Year you became a member _____ Referred by _____

Your Name _____

Business Name _____

Full Business Address _____

Business Phone (____) _____ Fax (____) _____

Business E-mail _____ Website _____

Home Address _____

Home Phone (____) _____ Birthday (month/day) _____

Email your newsletter to: Business Home _____
(List home e-mail if different than above)

BUSINESS CATEGORY (CHECK ONE)

Sole Proprietor Manager Partner Corporate Officer Potential Business

Owner _____

Type of Business (describe for directory - up to 25 words) _____

Are you adding an Associate Member? No Yes (\$30 fee required)

Associate's Name _____

MEMBERSHIP AND ADVERTISING FEES (please read all before selecting)

NOTE: Your dues must be received by October 15 to be in the directory and to place an ad in the directory)

\$60—New Membership (Free directory & website listing, name tag & certificate)

\$60—Membership Renewal—Full Year 2008-09 (Free directory & website listing)

\$30—Associate Membership—Full Year 2008-09 (All benefits of new or renewed members)

\$30—New or Renewal Membership for February-June 2009 (Website listing & name tag)

\$25—Business card size ad space in 2008-09 Directory

\$ _____ Payment Enclosed (please note if you are an associate whose fees have been covered by member)

Please make check or money order payable to:
MVBWN, PO Box 512, New Hartford, NY 13413

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