

GLVBN MEMBERSHIP FORM



Membership dues: \$85.00

Check Number:

Company Name:

Contact Name & Title:

Business Type (List attached):

Address:

Phone:

_____ Fax: _____

Email Address:

Website Address:

Total # of Employees: _____ Full Time: _____ Part Time: _____

Referred by:

Other Memberships:

Description of products and/or services

Reason for Joining:

Signature:

_____ Date: _____

Please make checks payable to:

Greater Lehigh Valley Business Network (GLVBN)



Please choose one of the following to be used as your Business Type

Accounting/Bookkeeping

Advertising

Architects

Automobile

Bank/Financial Services

Business/Consumer Services

Communications/Media

Audio-Visual

Information Technology

News

Publisher

Telecommunications

Consultant

Business

Medical

Personal

Contractor

Distribution

Economic Development

Education

Engineering

Health Care Services

Hotel

Legal/Financial Services

Manufacturer

Marketing & Public Relations

Real Estate:

Brokers

Developer

Trade Association

Other: