

	DATE:		
NAME (First, Middle Initial, Last)	JOB	TITLE	
ORGANIZATION OR COMPANY NAME			
ORGANIZATION OR COMPANY ADDRESS	CITY	STATE	ZIP
TYPE OF INDUSTRY OR BUSINESS			
BUSINESS PHONE EXT.	CELL PH	ONE (Not for publica	ation)
E- MAIL ADDRESS	WEBS	SITE ADDRESS	
Membership Levels			
Non- Profit \$135Small Business \$265Large Business \$450(10-20 employees)Large Business \$750 (21-50 employees)Presidents Circle\$10,000\$5,000\$2,500\$1,250	year w memb	ith the Greater West Covership. All information cosciate promotion. Signaterrors or omission	rves as a binding contract for one rina Business Association for your collected on this form will be used ature releases the GWCBA of any of content provided.
Associate Member Benefits		SIGNATU	RE
<ul> <li>Membership plaque</li> <li>GWC member discount at all events</li> <li>Ribbon cutting ceremony</li> <li>Monthly e-mail blast advertisement</li> <li>Free small business training programs</li> <li>I would like more information about becoming a GW</li> </ul>	C Advisory Co	nmittee Member	
Additional Benefits			
Give your business a boost by advertising through our  \$100 a month 1 episode, logo, shout out, link.  \$350 4 episodes a month. Logo, shout out, link, con  (You must commit to 3 to 6 months)	-	411 Unscripted or Let'z	z Connect Now Podcast Show