## INDUSTRY SPECIFIC BUSINESS RELATIONSHIPS APPLICATION



Which monthly industry group are yo	ou interested in joining?
<del></del>	Events, Weddings, and Attractions
☐ Education and Nonprofit	
☐ Health and Life Services	☐ Property Services
Name:	
Company:	Title:
Address:	
Phone:	Cell Phone:
Email:	
The following questions are being asked as a part of the participants' application process. Information given will be used to evaluate how you and the Chamber can work together to promote and maintain the Chamber's mission.  Please answer the following questions. Use a separate sheet of paper if needed.	
1. Description of your product or serv	rices that is fit for the industry group you are interested in
	round/experience in your field of expertise and how long ompany. (Or provide LinkedIn, Resume, or Curriculum
3. Are you apart of any networking g	roups? If yes, which ones?
4. What are two goals you are hoping	g to accomplish through being a member of this group?
Applicant's Acknowledgment:	
I understand that I am requesting to j monthly business relationships group	ioin a Greater Greenwood Chamber, industry-specific,
Name:	
Signature:	Date: