

Heartland Business Connect Membership Request



Applicant Information

Applicant Name: _____

Business Name: _____

Business Address: _____

Street Address

City

State

ZIP Code

Mailing Address: _____

(if different)

Street Address

PO Box

City

State

ZIP Code

Business Phone: _____

Mobile Phone: _____

Email Address: _____

Date: _____

Are you able to attend meetings the first and third Fridays of every month (Time TBD) ?

____ Yes ____ No

HBC Membership Dues - \$100
Carroll County Chamber
P.O. Box 175, Delphi, IN 46923
For more information, call 765-564-6757



**Heartland
Business
Connect**