

Membership Information Form

I would like to join the Hill City EDC as a:

_____Corporate

_____Large Business

_____Small Business w/ _____ number of employees

_____Friends of EDC

Company Name: _____

Type of Business: _____

Contact: _____

Address: _____

Mailing Address: _____

City: _____ Zip Code: _____

Phone Number (Work): _____

Additional Phone Number: _____

E-Mail Address: _____

Website Address: _____

Facebook page: _____

Sign up date and payment: _____

Questions and Answers

Tell me why you choose to start your business, when you started, and how you decided on the name?

What is that little niche you have in your business that nobody knows about?

What are your expectations and opportunities for your business now and in the future?

What challenges do you have for your business?

How would you see EDC helping you with your business?

What would you like to see different with businesses in Hill City?