## North America Small Business Alliance (NASBA) Membership Application

Which NASBA area are you applying for membership, volunteer or other? (Choose and complete all that apply) Headquarters Chapter - Location: \_\_\_\_\_\_, \_\_\_\_\_,

Choose Plan:  $\Box$  \$25.00 1-Year Membership OR  $\Box$  \$75.00 5-Year Membership Plan fees can be transmitted online, via secured <u>PayPal</u> or on-site during member meeting or event, via debit or credit card.

Please complete application and email to Cecelia Brown at <u>info@nasbusinessalliance.org</u>. Got questions about your membership? Send Email of your question(s) to <u>info@nasbusinessalliance.org</u> or call and leave a detailed message at (615) 809-1264.

Company Name: NORTHAMERICA	
Your Full Name: SMALL BUSINESS	5
Date of Birth:	
Title/Position:	
Business Address:	
Business Phone:	
Cell Phone:	
Email:	
Web Address:	

The following questions MUST be answered completely, before consideration of your NASBA membership. Please provide as much information as possible and feel free to attach any additional information, if needed.

Company Description & Services Provided:

What does your company specialize in?

What sets your company apart from your competition?

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What products or services does your business provide that can help a NASBA member in business or personal growth?

If a NASBA member were to choose to do business with you, what can they be assured of?

Any other inf groups, etc.)  Signature: Date:	- 15 - 5			Little more about	you, volunteer
		Website www.	nasBusiness	business succeed	
<b>THIS</b> App Rec'd Dt: Verified by:					OFFICE ONLY Pmt Rec'd Dt:
□ Approved by: _		Title:		_ Date:	

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