

| Your Information           |                                   |             |
|----------------------------|-----------------------------------|-------------|
|                            | Name of Business                  |             |
|                            |                                   |             |
|                            |                                   |             |
|                            | Job Title                         |             |
|                            |                                   |             |
|                            |                                   |             |
|                            | Last Name                         |             |
|                            |                                   |             |
|                            | First Name                        |             |
|                            | First Name                        |             |
|                            |                                   |             |
|                            | Physical Address                  |             |
|                            | •                                 |             |
|                            |                                   |             |
|                            | Mailing Address                   |             |
|                            |                                   |             |
|                            |                                   |             |
|                            | Contact Email Address             |             |
|                            |                                   |             |
|                            | - W                               |             |
|                            | Business Website                  |             |
|                            |                                   |             |
|                            | Office Phone (xxx) xxx-xxxx       |             |
|                            |                                   |             |
|                            |                                   |             |
|                            | Mobile Phone (xxx) xxx-xxxx       |             |
|                            |                                   |             |
| Level of Membership        | $\square$ Pillar of the Community | \$10,000.00 |
| -                          | ☐ Cornerstone                     | \$6,000.00  |
|                            | ☐ Platinum                        | \$3,000.00  |
| (Please contact office for | Gold                              | \$1,500.00  |
| payment options)           | Silver                            | \$750.00    |
|                            | Government                        | \$250.00    |

## **Send Application with Payment to**



135 Mississippi Parkway Canton, MS 39046 **Office** (601) 832-5592 collins.jan01@gmail.com