



Membership Application								
Applicant							Date	
Business								
Address								
City		P.O. Box		State		Zip Code		
Office Phone		Cell Phone		Email				
Business Description								
Primary type of work performed								
Years in business		# of Employees		Annual Sales				
NAICS Code								
Primary Decision-maker	Email:							
Name:								
Alternate Representative	Email:							
Name:								
Type of Membership								
Regular Member	<input type="checkbox"/>	\$2,000.00 per year	More than 250 employees					
	<input type="checkbox"/>	\$1,000.00 per year	More than 100 employees					
	<input type="checkbox"/>	\$750.00 per year	More than 25 employees					
	<input type="checkbox"/>	\$500.00 per year	25 employees and less					
Associate Member	<input type="checkbox"/>	\$500.00 per year	Non-manufacturing business and organizations					
Education and Community Services	<input type="checkbox"/>	\$500.00 per year						
Workforce Development	<input type="checkbox"/>	\$1,500.00 per year						
Individual Member	<input type="checkbox"/>	\$100.00 per year	Retiree or Individual					

Helping regional manufacturers prosper by creating public awareness of the needs of member companies and to work in creating educational pathways to meet the needs of member companies for skilled labor.

I have read the membership agreement and will adhere to the rules of membership

Checks Payable to:

Mahoning Valley Manufacturers Foundation

Mail to:

Sue Watson, MVMC

241 W. Federal Street, Youngstown, OH 44503