



## MEMBERSHIP APPLICATION

### Personal

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

### Work

Employer: \_\_\_\_\_ Job Title: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Preferred email :  Home  Work  Please send to both Preferred mailing:  Home  Work

How long have you lived and/or worked in Licking County? \_\_\_\_\_

Please list any other area clubs or organizations that you are a part of: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

### Annual Membership Fee: \$40

Check Enclosed  Please Invoice  Employer Sponsorship Please charge to:  VISA  MC  AMEX

Name on Card: \_\_\_\_\_ Card #: \_\_\_\_\_

Expiration Date: \_\_\_\_\_ CVV: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Please return completed form to Amelia Hitchens, Marketing Director of the Licking County Chamber of Commerce. Please email to [ahitchens@lickingcountychamber.com](mailto:ahitchens@lickingcountychamber.com) or mail to 50 West Locust Street, Newark, OH 43055. Checks can be made payable to **Young Leaders of Licking County**.

**THE NEXT GENERATION OF LICKING COUNTY LEADERS.**

Young Leaders of Licking County is an affiliate of the Licking County Chamber of Commerce