



Unicoi Business Alliance

MEMBERSHIP INFORMATION

Business or Member Name: _____

Contact Person: _____

Title: _____

Business Address: _____

Mailing Address: _____

Phone: _____ Fax: _____

Toll-Free Phone: _____

Email Address: _____ Website: _____

Facebook: _____

Number of Employees: _____ (full-time) _____ (part-time)

I understand that membership in the Unicoi Business Alliance constitutes my expressed invitation or permission for the UBA to communicate by telephone, facsimile machine to the number(s) I've provided above, email or written materials, including but not limited to those related to property, goods, services, events, meetings or notices, and the availability thereof. I also understand that these will be published in various UBA advertising, including but not limited to the UBA Membership Directory, Website, and Social Media EXCLUDING those I've checked in the following box(es):

- Telephone Number Fax Number Email Address Social Media

Other contacts to receive correspondence from UBA: _____

Additional business locations to be listed in the Membership Directory:



Unicoi Business Alliance

How long have you been in business? _____

Describe your business, including your product and/or service offerings.

What are your goals for your business? _____

How would you describe your ideal customer(s)? (Consider age range, income, gender, interests, location)

What have you done to market your business and with what results? _____

In one sentence, define your core offering to your customers. (For example, "we offer employee leasing services to small and medium-sized businesses." or "We sell machine cutting tools to small manufacturers.")

What are your key concerns related to your business? _____
