

# Lima Young Professionals Membership Application

Name \_\_\_\_\_  
                    **First**                    **Middle Initial**                    **Last**                    **Date**

Age \_\_\_\_\_ Date of Birth \_\_\_ / \_\_\_ / \_\_\_ Business Name \_\_\_\_\_

Business Mailing Address \_\_\_\_\_

Job Title \_\_\_\_\_ Phone \_\_\_\_\_

Fax \_\_\_\_\_ E-mail \_\_\_\_\_

Signature \_\_\_\_\_ Referred by: \_\_\_\_\_

**I am interested in serving on the following action teams:**

- Community Engagement (Illy Awards, Yea! Program, Love Lima, volunteer activity)
- Marketing (website, newsletter, event promotion, social media)
- Professional Development (monthly development luncheons)
- Social Development (monthly social after-hours events and social outings)
- Membership Committee (serve as YP Ambassador, assist in building membership)
- YP Community Cabinet (monthly meeting with area leaders: Mayor, Commissioners, Chamber, etc.)
- Executive YP Program (help yp's to build their business and position themselves as leaders in their field)

**General Information (optional):**

Hometown: \_\_\_\_\_

Education: \_\_\_\_\_

Family: \_\_\_\_\_

Favorite Thing About Lima/Allen County: \_\_\_\_\_

What Do You Hope to Gain from this YP Membership: \_\_\_\_\_

**Membership Fee information:**

Annual dues for the Lima YP are **\$96**.

**Payment Method:**

- Check (please include your name on the check for our records)
- Visa/MC Card Number \_\_\_\_\_ Expires \_\_\_\_\_

Billing Address \_\_\_\_\_

Security Code (3 digits on back) \_\_\_\_\_ Signature \_\_\_\_\_

- Please Bill Me (Chamber Members Only)

***\*\*A membership to the Lima YP does not entitle the member a Chamber membership, nor is a Chamber member entitled a YP membership.***



**Return to: Lima/Allen County Chamber of Commerce  
Mail: 144 S. Main St., Ste. 100, Lima, OH 45801  
Fax: 419.229.0266**

**Questions/Additional Info: Contact Erica Hawkins at  
419.222.6045 or ehawkins@limachamber.com**