



Information Request Form

Name:

Business:

Phone #

Email:

Description:

By joining the Brockville Women in Business organization you are agreeing to receive the BWB newsletter and be added to the E-vite list for future meetings. You also are agreeing to have your attendance published to the members before each meeting and to have your information published on the membership website.

I have reviewed and approve the Membership information stated above.

Date:

Signature: