confidential membership application

annual membership fee is $2,000 and includes participation by three individuals

additional fee of $500 for Peer Groups for each participant

THE HIGH CENTER
Partnering for Success
ELIZABETHTOWN COLLEGE

One Alpha Drive
Elizabethtown, PA 17022
717-361-1275
thehighcenter@etown.edu

about the applicant

company name | previous company name (if applicable) | web address*

primary contact's full name | title | email address**

*Web addresses will be included on the Center's website. **Required

additional participants

full name | title | relationship to applicant | email address

full name | title | relationship to applicant | email address

contact information

mailing address

city | state | zip

telephone number | fax number

physical address (if different from mailing address)

city | state | zip

referred by

name | company

about the company

Brief description of your business (Note: attaching company promotional material is appreciated but optional) _____

Date company was established: _____ month/day/year

Number of employees: _____ family _____ non-family

Generation:
- ☐ first
- ☐ second
- ☐ third
- ☐ fourth
- ☐ other _____

Primary Business Type:
- ☐ service
- ☐ manufacturing
- ☐ sales
- ☐ distribution
- ☐ other _____

Annual Gross Sales:
- ☐ $3 to 4.9 mn
- ☐ $5 to 9.9 mn
- ☐ $10 to 19.9 mn
- ☐ $20 to 49.9 mn
- ☐ $50+ mn

Signature _____ Date _____

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Please mail the completed application to: The High Center, One Alpha Drive, Elizabethtown, PA 17022

Make check payable to: Elizabethtown College - The High Center