

Member Registration form

Please attach two business cards and use print letters

Public Information: (for use on the web site and in publications)

First Name: _____ Last Name: _____

Business Name: _____

Business category/Description: _____

Business Address: Street: _____

City: _____ State: _____ Zip code: _____

Business Tel: (____) _____ - _____ Business Fax: (____) _____ - _____

Mobile #: (____) _____ - _____

E-mail: _____ Website: www. _____

Personal Contact Information: (for internal office use only)

Home Tel: (____) _____ - _____ Home Fax: (____) _____ - _____

Personal E-mail address: _____

Home Address: _____

Comments: _____

I was referred to the "Israeli Business Network of Beverly Hills" by: _____

Yes, I would like to be a member of the "Israeli Business Network of Beverly Hills" and agree to pay an annual membership fee of \$100.00. As a member, I hereby agree to follow the rules of ethics adopted by the "Israeli Business Network of Beverly Hills".

Name: _____ Signature: _____ Date: ____/____/____

I would like to volunteer and to be part of one of the following committees:

↑ Special Events Planning ↑ Membership ↑ Public Relations, Press and Publicity

Payment Information:

Checks payable to: *Israeli Business Network of Beverly Hills*

Online through PayPal: <http://www.ibnbh.org/payment.htm>