



MEMBERSHIP APPLICATION

I/We are applying for active membership in the Central New Jersey Business-2-Business Network Group. I/We will be billed annual dues for membership on the 1st of September of each year. The first yearly dues are an entitlement for membership until September of 2006.

PLEASE PRINT

DATE _____

CONTACT NAME _____

COMPANY NAME _____

ADDRESS _____

PHONE NUMBER _____ FAX NUMBER _____

CELL PHONE NUMBER _____

WEB SITE ADDRESS _____

E-MAIL ADDRESS _____

TYPE OF BUSINESS/PROFESSION _____

METHOD OF PAYMENT _____

***Please mail checks to: CNJB2B, 181 Hillside Avenue, Piscataway, NJ 08854**

***All major credit cards accepted, Contact CNJB2B at (732) 463-3918 with card information.**

ANNUAL DUES

Please check off type of membership.

- | | | |
|--------------------------|---|---------------|
| <input type="checkbox"/> | Type A Small business with 15 or fewer employees | 150.00 |
| <input type="checkbox"/> | Type B 16-75 employees, Non-profit Organizations | 200.00 |
| <input type="checkbox"/> | Type C 75-250 employees | 250.00 |
| <input type="checkbox"/> | Type D Large business with 251-500 employees | 350.00 |
| <input type="checkbox"/> | Type E 501-999 employees | 500.00 |
| <input type="checkbox"/> | Type F Large corporation with over 1,000 employees | 750.00 |
| <input type="checkbox"/> | Additional Business Units | 95.00 |
| <input type="checkbox"/> | Website link to your company | 75.00 |