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**Membership Form**

Please note, this information is for internal use only. Please complete and return to: inverness@impacthub.net

|  |  |
| --- | --- |
| **Name** |  |
| **Type of membership (Connect, 30, 60, unlimited or corporate)** |  |
| **Business Address – for INVOICING** |  |
| **E-mail** |  |
| **Contact No.** |  |
| **Emergency Contact Name and No.** |  |
| **Business/Organisation Name** |  |
| **How did you hear about us?** |  |
| **Please give us around 10 words that describe what you do – for our members wall!** |  |
| **Are you happy to be added to the mailing list for our monthly newsletter and information on future events?** |  |
| **Do you want to be in the Facebook group for members (private group)?** |  |
| **Would you like to join the collaboration group? (monthly meet ups to discuss potential collaboration work opportunities)** |  |

**This information is for Impact Hub Inverness use only. We will never share your information externally unless further consent is given. Please refer to our Privacy Notice for more details.**

**Please tick this box if you would like your business featured on the ‘members’ section of the website.** **[ ]**