

365 SMALL BUSINESS CIRCLE REGISTRATION FORM



COMPANY/BUSINESS INFORMATION

Business Name:

Contact Name:

Mailing Address:

Phone:

Email:

PAYMENT

Total Due: \$365.00

Pay in full by check

Pay quarterly by check (\$91.25)
Billed on January 1, April 1, July 1, October 1

Pay in full by credit card

Pay quarterly by credit card (\$91.25)
Charged on January 1, April 1, July 1, October 1- (Provide card info below)

Credit Card #:

Expiration Date:

CVV Code:

Signature:

Return in the enclosed envelope or to:
United Way of Marion and Taylor Counties
112 Adams Street, Suite 201, Fairmont, WV 26554

