

Progressive Referral Group

~ Member Profile & Application ~

Name:			
Title:			
Business Name:			
Address:			
Address:			
City:		State: OH	Zip:
Phone:		Fax:	
E-mail:		Web Site:	

How long has your business been in Lancaster and/or provided service to the Lancaster area?
Enter a description of your business and/or services here:
Explain what makes your business special (24-hour service, pick-up and delivery options, discounts to members, etc.)
In what business or professional organizations or community activities are you involved?
What do you hope to gain by becoming a part of the Progressive Referral Group?
What do you hope to give and share with other members of the Progressive Referral Group?
Additional information about me and/or my business:
Progressive Referral Group maintains a web site at http://www.prgl.org and provides to its members a free space. Please submit a paragraph or so that you would like to have displayed on the site. (Attach a separate sheet if necessary.)
What category should be used for your business? For example - Restaurant, Consulting, Accounting, etc. (Please limit category to three words or less.)

Signature:		Date:	
-------------------	--	--------------	--

Please fill out this form and either fax to (740) 681-1672 or mail to 2700 Kull Rd., Lancaster, OH 43130.