Progressive Referral Group

- Member Profile & Application -

Name:		
Title:		
Business Nan	ime:	
Address:		
Address:		
City:	State: OH Zip:	·················
Phone:	Fax:	
E-mail:	Web Site:	· · · · · · · · · · · · · · · · · · ·
How long has	s your business been in Lancaster and/or provided service to the Lancaster and	ea?
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 h	hope to give and share with other members of the Progressive Referral Group)?
Additional info	formation 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 email to: admin@prgl.org