



102 E Wall Street
 Harrisonville, Missouri 64701
 816 380 8114
 mfreeman@showmecasscounty.com
 www.ShowMeCassCounty.com

Membership Application

Primary Member Name: _____

Company Name: _____

Position at Company: _____

Street Address: _____

City: _____ State: _____ ZIP _____

Office Phone: _____ Office Fax: _____

Cell Phone: _____ Publish? Other Phone: _____ Publish?

E-mail address: _____

Website: _____

Nature of company's business: _____

Years in business: _____

Number of employees: full time: _____ part time: _____

Please indicate aspects of economic development of interest to you: Check all that apply.

Business Retention <input type="checkbox"/>	Workforce Development <input type="checkbox"/>	Business Attraction <input type="checkbox"/>
Rapid Response Team <input type="checkbox"/>	Targeted Industries <input type="checkbox"/>	Strategic Planning <input type="checkbox"/>
General Contracting <input type="checkbox"/>	_____ <input type="checkbox"/>	_____ <input type="checkbox"/>
_____ <input type="checkbox"/>	_____ <input type="checkbox"/>	_____ <input type="checkbox"/>
_____ <input type="checkbox"/>	_____ <input type="checkbox"/>	_____ <input type="checkbox"/>

Membership Types

Large Business
(More than 25 employees)

Small Business
(Less than 24 employees)

Sole Proprietor/
Business Owner

Benevolent
Organizations

Annual Investment

\$500

\$250

\$250

\$100

Individual Membership: Retired or Members in Transition

\$100

Make checks payable to **Cass County Corporation of Economic Development.**

Return this completed form with your payment.

Thank you!

Additional Member Information

Additional Member Name: _____

Position at Company: _____

Street Address: _____

City: _____ State: _____ ZIP _____

Office Phone: _____ Office Fax: _____

Cell Phone: _____ Publish? Other Phone: _____ Publish?

E-mail address: _____

Additional Member Name: _____

Position at Company: _____

Street Address: _____

City: _____ State: _____ ZIP _____

Office Phone: _____ Office Fax: _____

Cell Phone: _____ Publish? Other Phone: _____ Publish?

E-mail address: _____

Additional Member Name: _____

Position at Company: _____

Street Address: _____

City: _____ State: _____ ZIP _____

Office Phone: _____ Office Fax: _____

Cell Phone: _____ Publish? Other Phone: _____ Publish?

E-mail address: _____

Additional Member Name: _____

Position at Company: _____

Street Address: _____

City: _____ State: _____ ZIP _____

Office Phone: _____ Office Fax: _____

Cell Phone: _____ Publish? Other Phone: _____ Publish?

E-mail address: _____

Additional Member Name: _____

Position at Company: _____

Street Address: _____

City: _____ State: _____ ZIP _____

Office Phone: _____ Office Fax: _____

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E-mail address: _____