

Membership Application



...to foster professional and personal growth in the next generation of our community's business leaders.

Name: _____

Business Name: _____

Home Address: _____

Business Address: _____

Address to Receive Invoice: _____

Tel. Numbers: _____
(Home) (Business) (Cell)

Email Address: _____

Description of Business: _____

Signature: _____

Annual Dues:

\$25 Employees of Lillington Chamber members or government employees

\$45 Non-chamber members

Make check payable to Lillington Area Chamber of Commerce and mail to:
(Memo: Lillington Young Professionals)

Lillington Area Chamber of Commerce
PO Box 967
Lillington, NC 27546



Please contact the LYP President, Katie Smith if you have any questions:
Email: lillingtonyp@gmail.com, Phone: (919) 971-3221
Lillington Young Professionals information is also available on Facebook.