



Membership Application

Name: _____

Company Name: _____ Title: _____

Mailing Address: _____ City/State/Zip: _____

Phone: _____ Fax: _____

Email: _____ URL: _____

Primary purpose of your company and how you see using the Center for Excellence:

Membership Type (check one)		
Partner Membership \$500 <input type="checkbox"/>	Premium Membership \$1000 <input type="checkbox"/>	Resident Membership \$2400 <input type="checkbox"/>
<ul style="list-style-type: none"> 3 hours per month (36 hrs per yr). \$15 / hr. each additional hour Prominent display of promotional material in the center 	<ul style="list-style-type: none"> 8 hours per month (96 hrs per yr) \$10 / hr. each additional hour Prominent display of promotional material in the Center 	<ul style="list-style-type: none"> 4 hours /day office use Mailing address Center for Excellence 4 hours / month seminar space Company name on office Prominent display of promotional material in the Center
Annual Payment \$500 <input type="checkbox"/> Monthly Payment \$50 <input type="checkbox"/>	Annual Payment \$1000 <input type="checkbox"/> Monthly Payment \$100 <input type="checkbox"/>	Annual Payment \$2400 <input type="checkbox"/> Monthly payment \$200 <input type="checkbox"/>

Membership is subject to approval.

Your CFE membership also includes:

Picture and Bio displayed on the CFE website

All Center events displayed on the Center calendar of events and promotion on Upcoming events page

Payment Method:

Mail Check (payable to : **Center for Excellence**, 3803-B Computer Drive, Suite 106, Raleigh, NC, 27609

Credit Card: VISA MasterCard (accepted on site)

Scheduling events:

All events must be scheduled 1 week in advance using the on line event registration form.

Any event cancelled or rescheduled must be submitted through email at least 1 week in advance

Any event cancelled less than 72 hours prior to the event start time will be charged to the monthly

time allotment and will incur a \$10.00 reschedule fee. Email reschedules to Colleen Gray at

Colleensreva@gmail.com. All events will be scheduled for a minimum of 1 hour. Please check the

calendar to assure the date and time you are requesting are showing available on the CFE calendar.

Signature: _____ **Date:** _____