



# Membership Form

## ▶ ORGANIZATIONAL INFORMATION

Organization			Organization Phone Number	
Organization Email Address			Organization Mailing Address	
President/ CEO		Type of Business	# of Employees	
Minority-owned business	Woman-owned business	Black-owned business	Immigrant-owned business	Immigrant-owned business

## ▶ MEMBER INFORMATION

Primary Member Name		Secondary Member Name		
Primary Member Title		Secondary Member Title		
Primary Member Email Address		Secondary Member Email Address		
Primary Member Phone Number		Secondary Member Phone Number		
<b>Leader</b> \$10,000	<b>Supporting</b> \$5,000	<b>Advocate</b> \$2,500	<b>Friend</b> \$1,000	<b>Non-Profit</b> \$500

▶ Please email the completed form to:  
**Cristina Ancog**  
**Fund Development Coordinator**  
Cristina.Ancog@downtowndetroit.org

