



**LOCAL 310
BUSINESS NETWORK DIRECTORY**

Listing Application & Questionnaire

1. Name? _____
2. Address? _____

3. Phone Number? _____
4. Facility Where Employed? _____
5. Member of Local 310 Since? _____
6. Type of Business or Trade? _____
7. Name of Business? _____
8. Address of Business? _____
9. Business Phone Number? _____
10. Any Slogan or Statement which you would like to be listed on
Advertisement? (No more than Two (2) lines)

*There is no charge for this service but you must agree that if a
Member uses you or your services that they will receive at least a
15% Discount. I Agree () I Disagree ()*

Members Name Printed _____

Members Signature _____