

# YOUNG PROFESSIONALS GAGE COUNTY

## APPLICATION

### PERSONAL INFORMATION

Name

First Name

Last Name

Address

Street Name

Membership will  
be paid by:

☐

Employer

☐

Me

City

Postal Code

Phone &  
Email

Mobile Phone

Email

### EMPLOYER

Employer

Name

City

Title/Position

Name

### MEMBERSHIP TYPE

### ANNUAL DUES

☐

**Chamber Member**

(my employer is a Beatrice Area Chamber member)

**\$35**

☐

**NGage Member**

(my employer is a NGage member)

**\$35**

☐

**Individual Member**

(my employer is neither)

**\$50**

Join the group on Facebook: <https://www.facebook.com/GageCoYPG>  
email application to [info@ngagegroup.org](mailto:info@ngagegroup.org) - or - [info@beatricechamber.com](mailto:info@beatricechamber.com)

Payment Method:

☐

Invoice me

☐

Check enclosed:  
made out to BACC

Name & Signature

Date

**YPG**  
YOUNG PROFESSIONALS  
GAGE COUNTY