

Ottawa Business Builders Participant Application

Date of Application _____

Are you currently a member of the Ottawa Chamber of Commerce? _____

Business Represented _____

Representative for the Business _____

Alternate Representative _____

Business Address _____

Business Phone # _____

Alternate Phone #(s) _____

Business Fax Number _____

E-mail Address _____

Business Category - Please describe your business _____

List special areas of interest _____

Who/What are good leads for you? _____

Thank You for Applying