



**Startup Martinsville-Henry County , Virginia
Program Application • Deadline: February 17, 2017**

1. Name if Applicant: _____
2. Business Name: _____
3. Address: _____
4. Home Phone: _____ Cell Phone: _____
5. Email: _____
6. Primary Owners of Business: _____
7. Website: _____
8. Type of Business: _____
9. Business Location: _____
10. Capital Needed to Start Business: \$ _____
11. Capital/Equity in Place: \$ _____
12. Brief Description of Business: _____

By checking here, I have read details about Startup Martinsville–Henry County, Virginia, on C-PEG’s website and understand that I may/ may not be selected to participate in the program, which offers training, networking opportunities and potential monetary awards. If selected to participate in the program, I will attend scheduled trainings and events and participate as an engaged member of the group. If my business or business idea is selected as an award winner, once I establish an eligible business within the eligible region, I will use funds for the qualified business expenses.

Business Owner Signature

Business Owner Signature

Return to: C-PEG, P.O. Box 709, Martinsville, VA 24115 or amanda@mhcchamber.com
Questions: Call Amanda Witt, 276.632-6401