

**Martinsville-Henry County Chamber of Commerce
2024 Leadership M-HC Program
Registration Form**

Seven class sessions meeting on Tuesdays from 12:30pm-5pm

- | | |
|-------------|------------|
| 1. 10/29/24 | 5. 2/25/25 |
| 2. 11/19/24 | 6. 3/25/25 |
| 3. 12/17/24 | 7. 4/29/25 |
| 4. 1/28/25 | |

YES! I would like to register for the Martinsville-Henry County Chamber of Commerce's 2024 Leadership M-HC Program.

Name: _____

Title: _____

Company Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ FAX: _____ Email: _____

Residence:

- | | |
|---------------------------------------|---------------------------------------|
| <input type="checkbox"/> Martinsville | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Henry County | |

Professional Experience: _____

Business and Personal Activities: _____

Community Interests: _____

Education: _____

Please check the appropriate fee and payment method.

- | | |
|--|---|
| <input type="checkbox"/> Chamber Member \$350 | <input type="checkbox"/> Check is enclosed. |
| <input type="checkbox"/> Non-member \$450 | <input type="checkbox"/> Please invoice me. |
| <input type="checkbox"/> Please put on my Credit Card: | |
| ____ Visa ____ MasterCard | |
| ____ Discover ____ American Ex | |

Card Number: _____ Expiration Date: _____

You may also pay online at www.martinsville.com

Please make checks payable to the
Martinsville-Henry County Chamber of Commerce
Return to: **Martinsville-Henry County Chamber of Commerce**
P.O. Box 709, Martinsville, VA 24114
Or FAX to: 276/632-5059