

130 McGhee Rd. Suite 220 Sandpoint, ID 83864 posfiinc@gmail.com www.posfi.org

## **MEMBERSHIP APPLICATION**

Legal Business Name:	DBA			
Primary Contact:		Position:		
Mailing Address		City	State	Zip
Email Address:	@	Website:		
Business Phone #: ()	<del>-</del>	_ Cell Phone #: (_		
I AM APPLAYING FOR THE FOLLO	WING MEMBERS	HIP		
Supporting member (No Kite	chen Use) \$250 A	nnual Membership FEE du	ue upon approval.	
Regular Membership with k	itchen use \$250 <i>i</i>	Annual Membership FEE d	lue upon approval.	
Membership dues are billed annua notify us in writing.	lly on your annive	rsary date. Should you no	longer wish to be a	a member please
POSFI was formed and organized to	o:			
<ol> <li>To encourage and support entrepreneurs.</li> <li>To elevate business standa</li> <li>To create employment opported community.</li> </ol>	rds and methods	for small to medium sized	I food industry emp	loyers.
Support will be given to all member have networking opportunities with business. Only Regular Members a	other members,	and industry specific infor	•	
A Kitchen Rental Agreement must b	oe signed and fees	s paid prior to kitchen use.		
Printed name	 Signat	ure		