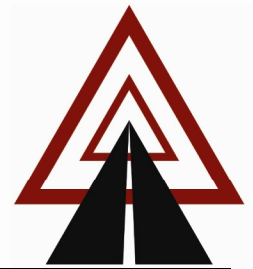


**Thanks for Teaching
Enrollment Form***



Business Name:	Contact Name:
Type of Business:	Position:
Address:	Phone:
City:	Fax:
State:	Email Address:
Zip:	Current Date:
Web Address:	Start Date:
Offer description:	
Signature:	

**Thanks for Teaching participation limited to Chamber members only.*

Please return by mail or fax to:
Barbara Massey – Business/Education Coordinator
barbaramassey@alamancechamber.com



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