



Equality Business Alliance Registration

Please place an 'X' in the box for items that should be published in the EBA directory. Then send this completed form EBA@OKEQ.com or bring into the OKEQ Center to the attention of Deb Doffing.



<input checked="" type="checkbox"/> Business Name. Please spell out all acronyms.	<input type="checkbox"/> Business Phone	
<input type="checkbox"/> Business Address, City, State, Zip		
<input type="checkbox"/> Mailing Address, City, State, Zip		
<input type="checkbox"/> Primary Contact	<input type="checkbox"/> Primary Phone	
<input type="checkbox"/> Secondary Contact	<input type="checkbox"/> Secondary Phone	
<input type="checkbox"/> Email <i>for customers</i>	<input checked="" type="checkbox"/> Web Site	
<input type="checkbox"/> Email <i>for EBA & OKeQ newsletters</i>	<input checked="" type="checkbox"/> Business Category <i>(Retail, Spa/Salon, Dining, etc)</i>	
<input checked="" type="checkbox"/> Short Description of your business <i>(200 Character limit)</i>		
Payment method: ___ Check ___ Visa ___ MC ___ Amex ___ Online (www.okeq.org/store) <small>(checks should be made out to Oklahomans for Equality) (Please place 'EBA' in Memo field)</small>		
Card # _____ Exp. Date _____		
Signature _____		
Please select your membership level		
___ \$25 Student	___ \$50 Individual	___ \$75 Family
___ \$50 Non-Profit	___ \$100 Small Business (<25 FTE)	___ \$200 Corporate (>25 FTE)
The EBA is looking for business owners to form a steering committee to ensure the development of this chamber meets and need and requirements of the membership. This will eventually become an elected board of directors for the EBA.		
<input type="checkbox"/> Please contact me about helping to grow the EBA!		
<input type="checkbox"/> Please contact me about hosting an EBA Networking event		