



## Greater Mankato Young Professionals Participation Agreement

Are you a young professional age 21-40 interested in connecting with others in the Greater Mankato community? Enjoy professional development with a focus on learning, socializing and community service.

The Greater Mankato Young Professionals hold one social and one professional development event per month. Annual participation in the program is \$300 per individual and includes admission to all activities and events (a few special activities may be subject to additional charges). YP applicants must be employed by a business that is an Engaged through Diamond level member of Greater Mankato Growth, and also included as a representative in their businesses' membership. Also, the membership fee will be pro-rated for anyone joining during the calendar year.

By submitting your application you agree that:

- All fees paid are non-refundable, but could be transferred to another employee.
- If you are past due with your payment, the YP will not be allowed to participate in YP events until payment is received. After 45 days past due, an email will be sent to notify you that membership will cease.
- Your YP Membership will automatically renew on January 1 of each year, unless you notify GMG in writing by either June 1 or December 1 (effective ending dates of July 1 or January 1).

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Business/Organization: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City/State/Zip \_\_\_\_\_

Business Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email: \_\_\_\_\_ Birth-date: \_\_\_\_\_

Supervisor Name: \_\_\_\_\_ Supervisor Email: \_\_\_\_\_

### Method of Payment

- Invoice Employer
- Check (made payable to Greater Mankato Growth)
- Automatic Bank Withdrawal (payment authorization form required)
- Credit Card (payment authorization form required)

### Frequency of Payment

- Annually (due January 1)
- Semi-annually (due January 1 and July 1)
- Monthly (requires a 1 month down payment & automatic withdrawal or credit card charge)

YP Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### Return Application To:

Shannon Gullickson • [sgullickson@greatermankato.com](mailto:sgullickson@greatermankato.com)  
Greater Mankato Growth 3 Civic Center Plaza Suite 100, Mankato, MN 56001  
Fax: 507.345.4451

A program of:





GREATER  
MANKATO  
GROWTH

## PAYMENT AUTHORIZATION FORM

Greater Mankato Growth is pleased to offer you different options for you to make a payment. Choose from two payment options: payments through your bank account or credit card. Members can always view their open invoices and pay online in the Member Login area of the Greater Mankato Growth website (visit [greatermankato.com](http://greatermankato.com) and click on "member login" under the membership tab).

### BUSINESS INFORMATION

BUSINESS NAME: \_\_\_\_\_

BUSINESS PHONE: \_\_\_\_\_

PAYMENT FOR: \_\_\_\_\_

AMOUNT: \_\_\_\_\_

### COMPLETE FOR AUTOMATIC BANK WITHDRAWAL

FINANCIAL INSTITUTION: \_\_\_\_\_

TYPE OF ACCOUNT:  CHECKING  SAVINGS

*\*For checking account, attach a voided check from the account you wish to have your bill paid.*

ACCOUNT NUMBER: \_\_\_\_\_ BANK ABA/ROUTING NUMBER: \_\_\_\_\_

### CREDIT CARD INFORMATION

Visa  MasterCard  Discover  American Express

NAME ON CARD: \_\_\_\_\_

ACCOUNT NUMBER: \_\_\_\_\_

EXPIRATION DATE: \_\_\_\_\_ SECURITY CODE (LAST 3 DIGITS ON BACK OF CARD): \_\_\_\_\_

BILLING ZIP CODE: \_\_\_\_\_

### AUTHORIZATION

I authorize Greater Mankato Growth, Inc. to deduct the amount listed above in the one-time payment amount field.

AUTHORIZED REPRESENTATIVE NAME (PRINTED): \_\_\_\_\_

AUTHORIZED SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

*\*Must include both signatures if the funds are to be drawn from a joint bank account.*