

## APPLICATION FOR GROWTH GROUP MEMBERSHIP

NAME	NAME OF BUSINESS	
MAILING ADDRESS	CITY/STATE/ZIP	
COUNTY	EMAIL ADDRESS	
PHONE	CELL PHONE	WEBSITE

Describe your business:

Do you have a business plan?    YES    NO    (If yes, please attach or enclose it)

How long has this business been in existence?  
\_\_\_\_\_ 2 YEAR OR LESS      \_\_\_\_\_ 3-5 YEARS      \_\_\_\_\_ 5-8 YEARS      \_\_\_\_\_ 9 YEARS OR MORE

Gross sales in last fiscal year \$

Number of employees:  
\_\_\_\_\_ Full-Time      \_\_\_\_\_ Part-Time

Type of Business

- \_\_\_\_\_ Manufacturing
- \_\_\_\_\_ Health Care
- \_\_\_\_\_ Speciality Retail
- \_\_\_\_\_ Construction
- \_\_\_\_\_ Technology
- \_\_\_\_\_ Transportation
- \_\_\_\_\_ Mining or Extractive Related Industries
- \_\_\_\_\_ Tourism/Leisure/Recreation/Crafts

Approximately what percentage of your sales derives from outside the northeast region of Minnesota (and Douglas County in Wisconsin)? \_\_\_\_\_ %

If your business would achieve substantial growth, what would it look like?

# Greenstone Group

---

Name three specific goals for growing your business:

---

Name three specific skills you want to achieve in working with a coach:

---

What expectations would you have in working with a coach-facilitated peer group of business owners?

---

Have you ever been a member of similar business discussion/study group?

YES NO (If yes, please describe)

---

Your signature below indicates your agreement with the following program guidelines:

- Participation in skill assessment process for coaching placement
- Share business information and participate in data collection and evaluation of Greenstone Group

SIGNATURE

DATE

---

Return this completed application to Greenstone Group by one of these methods:

E-mail: [Kathyk@greenstonegroup.org](mailto:Kathyk@greenstonegroup.org)

Fax: Kathy Keely at 218.623.5747

Mail: Kathy Keely, Greenstone Group, 424 W Superior St, Suite 400, Duluth, MN 55802

Please call Kathy Keely at 218.623.5735 with any questions or concerns.