



# Kings County Employer Advisory Council Membership Application

Date: \_\_\_\_\_  New  Renewal

**Please Complete All Information and Return To The Address Below**

Company Name \_\_\_\_\_

Name of Member \_\_\_\_\_ Title \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ Zip \_\_\_\_\_

Telephone \_\_\_\_\_ Fax \_\_\_\_\_ Number of Employees \_\_\_\_\_

Type of Business \_\_\_\_\_

E- Mail \_\_\_\_\_

Years in Business \_\_\_\_\_ Would you be willing to serve on a committee? \_\_\_\_\_

Type of Entity  Profit  Nonprofit  Government Agency

How did you hear about the EAC? \_\_\_\_\_

**Membership dues: \$25.00 per person for one year and /or \$50.00 per Company for one year.**

**Please make checks payable to: Kings County Employer Advisory Council.**

**Mail payment & this application to: EDD, Employer Advisory Council, 124 N. Irwin Street  
Hanford, CA 93230**

The information given above is strictly confidential, for the exclusive use of the Employment Development Department, the Employer Advisory Council, and the California Employer Advisory Council. This information may not be used for solicitation, the creation of mailings lists. Or any other unauthorized use and will not be released unless authorized by statute.