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.