Young Contractor Member/ Student Application Form

If printing, please duplicate and complete this form for each individual within your company who is submitting an application for membership in AGC Georgia's Young Leadership Program as a Young Contractor Member.

If you prefer to complete the form electronically, please email Machell Harper at harper@agcga.org.

Applicant Information:			
Name:	Birth	ndate:	
Job Title:	How Long in This Pos	How Long in This Position:	
Office Phone:	Cell Phone:		
Email:			
College Attended:	Year Gradua	ated:	
☐ AGC Student Chapter Member	Attending (school):		
Company Information:			
Company Name:			
Mailing Address:			
City:	State: Zip Code	2:	
For Applicant to Complete:			
attending, I was a member of the	attended XYZ College pursuing a degree in Conse e following organizations and student-led group: n LMN Project. I am/have been involved with the	s. This past summer, I was an intern at	
	perience, YLP members are encouraged to serve of Focus of most interest to you: etworking Charitable Works Profession	on one of three Areas of Focus. nal Development	
Signature of Applicant:	C	Date of Application:	
Payment Options:			
	o AGC Georgia. Mail copy of this form with your c Georgia; P. O. Box 934023; Atlanta, GA 31193		
\square Charge credit card in the amou	unt of \$100. \square Visa \square MC \square AmEx \square Discove	r	
☐ AGC Student Chapter Member;	; Charge credit card in the amount of \$25. \Box Vis.	a □MC □AmEx □Discover	
Card Number:	Name on Card:	Exp	

Regardless of payment method, please scan completed application form to harper@agcga.org.

For more information or questions about the application process, please contact Machell Harper, Director of Member Services at 678.298.4108 or harper@agcga.org or call AGC Georgia at 800.203.4629.