**Date:** Enter date

**Account Name:** Enter

*(Name of company or business)*

**Parent Account (optional):** Enter

*(If company is owned by another entity)*

**Primary Contact:** Enter

**Title:** Enter

**Primary Phone:** Enter

**Secondary Phone:** Enter

**Contact Address:** Enter

Enter

Enter

**Email Address:** Enter

**Business Website:** Enter

**Brief Business Description**

Enter description here.

**My Business is (check one):**  *Technology*  *Non-technology*

*Other (please list)* Enter text.

**Identify the Industry:** Choose an industry or list: Enter text

**My business is (check one):**  *Pre-revenue*  *Revenue generating*

**I am interested in:**

*Building Residency Yes*  *No*

*Affiliate Membership Yes*  *No*

**I am interest in participating in the following program(s).**

*Virtual Membership*

*Grants for Growth*

*Clean Tech Program*

*Genius NY*

**Are you interested in participating in the NYS Innovation Hot Spot?** *Yes*  *No*

*Please complete this form and submit it to* [*tgadmin@thetechgarden.com*](mailto:tgadmin@thetechgarden.com) *or hand in at front desk.*

*Thank you for your interest in becoming a Tech Garden member. One of our staff members will be in touch with you to discuss your needs and how we can help you.*