

Ribbon Cutting/Groundbreaking/After Hours

Information for Agenda Press Release

Fax: 812-7594

Date and Time _____ Contact _____ Phone _____

Name of Business _____

Address _____

Owner of Business _____

Speaker at Ribbon Cutting _____

Type of Service Provided _____

Special Guests Attending _____

Are you a new business? Yes No

How long has your business been open? _____

If a new or expanded facility, what is the size of the facility? _____

Number of Employees _____

If you are not a new business, what growth has this company experienced?

Is this business also a member of West Monroe/West Ouachita Chamber? Yes No

Please provide any other information you would like for the chamber to include in a press release to the media.
