



OLATHE
 CHAMBER OF COMMERCE
 ONE VISION. ONE VOICE.

The French Connection

Application Form

Non-Profit Organization: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Website: _____

Contact Name: _____

Email: _____ Phone: _____

Street Address: _____
(if different from organization address)

City: _____ State: _____ Zip: _____

Please provide a description of your organization. *(attach additional page if needed)*

Why do you want to be a member of the Olathe Chamber of Commerce? *(attach additional page if needed)*

Please submit this form to Courtney Dubbert at the Olathe Chamber to be considered for The French Connection.

Olathe Chamber of Commerce
 18001 West 106th Street, Suite 160
 Olathe, KS 66061

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 913.782.4636 (fax)
 cdubbert@olathe.org