

## WEST VIRGINIA STATE UNIVERSITY ECONOMIC DEVELOPMENT CENTER

## **Membership Application**

Name:	
Home Address:	
City/State/Zip:	
Phone: Alt. Phone:	
Email:	
Driver's License #: Birthdate:	No one under the age of 18 is permitted without being accompanied by a parent/guardian.
Access Code Requested (please choose a 4-digit code):	
Company/ Organization Name:	
Company/Organization Description:	
☐ Mailbox Needed ☐ No Mailbox	
Select Membership Plan: ALL ROOMS MUST BE RESERV	 VED
<ul> <li>Access to facility M – F 8:30am-10pm; Sat 8:30am – 5p</li> <li>Access to open work bar, computer stations, Wi-Fi and</li> <li>Access to Shared Office for 8 hrs. per week or Meeting</li> <li>Access to networking and consultations opportunities at</li> <li>Business Services- Stamps/envelopes, copy /fax/ scan Additional photocopies, computer printing and faxing</li> <li>Usage of facility's mailing address for business purposed</li> <li>Studio Plan (2 Partners) - \$50.00 per month with 6-month in Access to Studio M – F 8:30am-10pm; Sat 8:30am – 5</li> </ul>	d conference phone g Space for 5 hrs. per week among co-workers & events in (limited to 50 copies per month. ing at 10 cents per sheet) es membership agreement
<ul> <li>Access to Studio in 1 of 3 dain ropin, Sat 6.3 dain 1 of 3 dain 1 of 3 dain 1 of 3 dain 1 of 3 dain 2 dain 2 of 3 dain 2 of 3 dain 2 dai</li></ul>	per week
<ul> <li>Office Tenant (2 Partners) - \$300.00 per month with a 12-n</li> <li>Private, furnished office space with dedicated phone line.</li> <li>Access to office M – F 8:30am-10pm; Sat 8:30am – 5p</li> <li>Access to Meeting Space for 5 hrs. per week.</li> <li>Business Services- Stamps/envelopes, copy/fax/scandditional photocopies, computer printing and faxion.</li> <li>Usage of facility's mailing address for business purpose.</li> </ul>	ne and high-speed internet om; Sun- 8:30am- 5pm** an (limited to 75 copies per month. ing at 10 cents per sheet)

\*\*Due to Covid-19 restrictions, the WVSU EDC will close each day at 5pm and will be closed on Saturdays/Sundays until further notice. Sorry for the inconvenience.

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**Tenants and Co-Working Members**: Only one code is provided with your plan. You can request your partner be granted an access code for an additional \$10.00 fee. The tenant/co-working member cannot share their code with anyone; including partners. Sharing your code is a violation of the policies and procedures of the EDC and can result in your membership being terminated without refund of payments made.

Membership Start Date:	Membership End Date:
Payment Schedule:	
$\square$ Invoice monthly; Payment due on the	e 1st of each month.
$\ \square$ Cash is accepted in person only	
☐ Credit, Debit, Check or Money Orde (Make Check/Money Order payable	· · · · ·
Coworking Membership Plan details are by these terms regarding my participate	, hereby acknowledge that I have read and understand the nd the EDC Policies & Procedures and further agree to be bound tion in and use of the EDC facility and services. I understand that sult in termination of agreement and facility access and forfeiture of
Member Signature:	Date:
EDC Rep. Signature:	Date:
	By: By:
Policies & Procedures version	_
Additional Notes:	