



CO.STARTERS Registration

Personal Information

First Name	Last Name
Address	City
State	Zip
Phone	E-mail

Tell Us More About Your Expectations

Big Idea? <i>(Please provide a description of the product or service you plan to offer. If you are thinking of becoming a business owner but are unable to share your concept, please describe why you want to be in CO.STARTERS).</i>	
Business Concept	
Is your business up and running now? ____ Yes ____ No	Business Name
Website	Twitter

I do hereby give permission to NTEC (CO.STARTERS), its agents, and others working under its authority, full and free use of video/photographs containing my image/likeness. I understand these images may be used for promotional, news, research and/or educational purposes. I hereby release, discharge, and hold harmless NTEC and its agents from any and all claims, demands, or causes of action that I may hereafter have by reason of anything contained in the photographs or video. I do further certify that I am either of legal age, or possess full legal capacity to execute the foregoing authorization and release

_____ **I Agree**

I understand that NTEC does not guarantee that I will be successful in my business. Furthermore, the benefits gained from participating in CO.STARTERS are a result of time, energy and dedication to the training program, and thus are not based solely on the completion of the coursework. I further understand and authorize NTEC to provide applicable information to the assigned mentor, if applicable. I understand that any information released to be held in strict confidence by him/her. No person will be excluded from participation in or otherwise subjected to discrimination in regard to services, programs and employment provided by the Northwest Tennessee Entrepreneur Center based on race, sex, color, national origin, sexual orientation, disability, age or religion.

_____ **I Agree**

Date

Signature



Northwest Tennessee Entrepreneur Center

206 White Street P.O. Box 963 - Martin, TN 38237

Phone: 731.587.4213 - Toll Free: 800.750.6866 - Fax: 731.261.2470 - Email: carol.reed@nwtd.org