**MT INVEST Community Employment**

**Individual Registration Form**

**Email completed form to** [**gbrandenburg@ctatllc.com**](mailto:gbrandenburg@ctatllc.com)

**Check one:**

|  |  |
| --- | --- |
|  | **My Organization has a membership** |
|  | **Individual Registration $85.00** |

Participant Name: Title:

(First) (Last)

Phone: ( ) E-mail:

Organization Name:

Address:

(Street) (City) (State) (Zip)

Contact Person: Title:

(First) (Last)

Phone: ( ) E-mail:

**Make check payable to: CTAT, LLC FEIN #47-4138161**