



## Business Competition Registration

### Primary Applicant Information

Full Name -

Phone -

Email -

Address -

City -

State -

Zip -

### Any Additional Partners?

Full Name -

Phone -

Email -

Address -

City -

State -

Zip -

Full Name -

Phone -

Email -

Address -

City -

State -

Zip -

### What's Your Business Idea?

Business or Project Name -

Give Us a Short Description of Your Business Idea (100 words or less)

By completing this registration form, I hereby agree to the guidelines of **Evolution Wytheville**.

Signature: \_\_\_\_\_

**Registration Forms should be submitted by January 19, 2018**

#### Mail or Email to:

Downtown Wytheville, Incorporated  
Todd Wolford – Exec. Director  
180 W Main Street – Suite 4  
Wytheville, VA 24382

[exedir@downtownwytheville.org](mailto:exedir@downtownwytheville.org)



**Questions?**

(276)223-3343

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