

## MASTERMIND

### EXPRESSION OF INTEREST

(Complete in full)

Name: \_\_\_\_\_ Title/Position: \_\_\_\_\_

Business Name: \_\_\_\_\_

Business Address: \_\_\_\_\_

City/Town: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Tel: \_\_\_\_\_ Cell: \_\_\_\_\_

Email: \_\_\_\_\_ Website: \_\_\_\_\_

Please tell us about your business/products/services and yourself (include all current businesses):

Are you an NLOWE Member?      Yes       No

If yes, are you:      Silver       Gold       Platinum

If no, are you willing to become a member to join a Mastermind group?      Yes       No

Are you currently doing business with another NLOWE Member?      Yes       No

How did you find out about our Mastermind groups?

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If someone referred you, please let us know who so we can thank them:

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**You must be an NLOWE Member to participate in the Mastermind program.  
Learn more about NLOWE Membership at [nlowe.org/WhyJoin](http://nlowe.org/WhyJoin).**

**Application Submission:** Please submit by email to your local NLOWE Business Growth Advisor

**Denise Cornick** | Avalon Region  
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**Paula Flood** | Eastern Region  
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**Marvella Wells** | Western & Labrador Region  
E: [mwells@nlowe.org](mailto:mwells@nlowe.org)

Thank you for your interest in our Mastermind groups.  
You will receive confirmation of receipt within 2 business days.  
If you have any questions, don't hesitate to contact us at [info@nlowe.org](mailto:info@nlowe.org)



NEWFOUNDLAND & LABRADOR ORGANIZATION OF  
WOMEN ENTREPRENEURS