# Community Business Directory
## Registration Form

Please complete the Registration Form if you wish to be included in the Community Business Directory and return it to:
community@mms.vic.edu.au

| | |
|---|---|
| **PARENT/CARER NAME** | |
| **CHILDREN AT MMS** **(Please include name and Cycle)** | |
| **NAME OF BUSINESS** | |
| **CONTACT PERSON** | |
| **POSITION** | |
| **TYPE OF BUSINESS** | |
| **BUSINESS ADDRESS** | |
| **BUSINESS PHONE** | |
| **BUSINESS EMAIL** | |
| **WEBSITE ADDRESS** | |
| **BUSINESS DAYS & HOURS** | |
| **DO YOU OFFER ONLINE SERVICES?** | ☐ YES ☐ NO |
| **DO YOU OFFER DELIVERY?** | ☐ YES ☐ NO |
| **CAN YOU PROVIDE A LOGO?** | ☐ YES ☐ NO |
| **DESCRIPTION OF SERVICES OFFERED** | |

### Office use only

Date Received:_____

Spreadsheet Entry: ☐

Directory Entry: ☐ Edition: _____