LEAN IN | Women2Women

GRCA
GREATER READING CHAMBER ALLIANCE
606 Court Street
Reading PA 19601
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Application for ***Lean In Circle***

Name: _____

Employer: _____

Address: _____

_____

Email: _____ **Phone**: _____

Position: _____ Years in Position: _____

Age Range:

20-25 25-30 30-35 35-40 40-45 45-50 50+

Do you supervise personnel? _____ If so, how many? _____
Y/N

Preferred Meeting Time: Morning 7:30 – 9:30 am _____ Afternoon 4:30 – 6:30 pm _____

Reason for joining a Lean In Circle: (please write a brief paragraph describing your expectations and goals for your involvement in the program):

Participants will be expected to:

- Attend all scheduled meetings, unless sick, on vacation or handling an emergency.
- Commit to total confidentiality.
- Share openly – be willing to give and get.
- Commit to good group discussion.

I have read the application and understand the expectations involved. Participation limited to 14 per group to allow for good dynamics and the ability to form a cohesive co-hort**. Lean In Circles will meet 10 times/year with a participation fee of $500/year.**

Signature _____ Date _____

Please return application to Rachael Romig @ rromig@greaterreading.org by August 31, 2018.

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