



# Business Contact Profile

*Vision: To assist families and individuals accomplish their hopes, dreams, and goals through the use of educational and professional development and resources.*

*Mission: To provide educational and professional assistance to families and individuals who want to enrich their lives and move towards a future they have dreamed of having.*

*Goals: Brighter Tomorrows Begin Today will focus on reaching the distressed population. We as an organization expect to interact with all types of families and individuals who are distressed economically, physically, mentally, and socially.*

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Date: \_\_\_\_\_

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

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

Phone Number(s): \_\_\_\_\_

Email Address: \_\_\_\_\_

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

Describe your Business Activities:

How is Your Business Organized (Check One):  LLC  Corporation  Non-Profit

Sole Proprietorship  Partnership

Other \_\_\_\_\_ (Explain)

Do you subscribe to BTBT's goal, mission, and vision: Yes \_\_\_\_\_, No \_\_\_\_\_

What is your business willing to offer to Brighter Tomorrows Begin Today and our clients:

\_\_\_\_ Mentorship

\_\_\_\_ Job Opportunities

\_\_\_\_ Counseling/Guidance to Others

\_\_\_\_ Apprenticeship

\_\_\_\_ Sponsorship at Events

\_\_\_\_ Sponsorship at Fundraisers

\_\_\_\_ Donations

\_\_\_\_ Speaking at Events

What other type of services would you be willing to provide to BTBT and their clients: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Please list all of your licenses required for your business: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Mail this form to P.O. Box 62, Bumpass, Virginia 23024  
Email this form as an attachment to [admin@brightertomorrowsbegintoday.org](mailto:admin@brightertomorrowsbegintoday.org)  
Give this form to a Brighter Tomorrows Begin Today representative

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**For Administrative Use Only:**

**Comments:** \_\_\_\_\_

Notes: