

# Incubator Program Expression of Interest Form

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

Email: \_\_\_\_\_ Contact No. \_\_\_\_\_

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

What stage of your business are you at?

- ☐ I have an idea
- ☐ I'm in my first year of business
- ☐ I have an established business but am looking to expand

Company/Business Name (if applicable): \_\_\_\_\_

Business Website (if applicable): \_\_\_\_\_

Email your completed form to **hello@theconsortiumlounge.com.au**

Once we have received your Expression of Interest Form, we will contact you to provide you with further information.

Contact Information

0423 809 680 | [hello@theconsortiumlounge.com.au](mailto:hello@theconsortiumlounge.com.au)



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