

## Application for Membership

<b>Business Name:</b>	
<b>Owner or Contact Person:</b>	<b>Telephone:</b>
<b>Street Address:</b>	<b>Telephone:</b>
<b>City, State, Zip:</b>	<b>Fax:</b>
<b>Billing Address(If different)</b>	<b>Email:</b>
<b>The year your company was established:</b>	<b>Number of employees:</b>

Brief description of your business, services, and/or products for our Files, Newsletter and Website:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

*Please indicate any information you do not wish to be published or given out by putting "DNP", (Do Not Publish), by it.*

**What Category would you like to be listed under on our Web Site?**

**Web Site Address:** \_\_\_\_\_ **Would you like a link to our Web Site? Yes \_\_\_ No \_\_\_**

**Would you like to receive the paper copy of the monthly Chamber Newsletter? Yes \_\_\_ No \_\_\_**

**Would you like to receive our weekly mass emails? Yes \_\_\_ No \_\_\_**

### Membership Investment Schedule

Self – 5 Employees	\$160.00	Utility	\$385.00
6 – 15 Employees	\$175.00	Financial Institution	\$275.00
16-25 Employees	\$195.00	Municipality	\$135.00
26-100 Employees	\$220.00	Non-Profit	\$ 85.00
101-200 Employees	\$250.00	Individual	\$ 80.00
201-300 Employees	\$275.00	Associate Member	*Call for fee
301-500 Employees	\$300.00		



**Total Investment** \$ \_\_\_\_\_

**Total** \$ \_\_\_\_\_

**Payment Enclosed (check Number)** \$ \_\_\_\_\_

- For your convenience we take Visa & MasterCard -

Bill Me \_\_\_\_\_ Yearly \_\_\_\_\_ Bi-Annually \_\_\_\_\_ Quarterly \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Please print name \_\_\_\_\_