



## MEMBERSHIP APPLICATION

*Your company will be listed on our online Business Directory and printed in our Community Profile.  
Please indicate how you would like your free listing to appear.*

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

Contact Name: (Mr/Ms/Dr) \_\_\_\_\_

Title: \_\_\_\_\_

Number of Employees: \_\_\_\_\_ Date Established: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Address: \_\_\_\_\_ Publish (Y/N)

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Billing Address (if different from above): \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email: \_\_\_\_\_ Publish (Y/N)

Website: \_\_\_\_\_ Publish (Y/N)

Business Category: (First category listing is free. Additional listings are \$50.00 each.)

Business Description: (Give us your description in 25 words or less and for \$75.00 we will post it on our website.)

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Chamber Representative: \_\_\_\_\_

Your membership dues may be deducted as an ordinary and necessary business expense, not a charitable contribution.

Annual Dues \$ \_\_\_\_\_  
Additional Category @ \$50.00 \$ \_\_\_\_\_  
Business Description @ \$75.00 \$ \_\_\_\_\_  
Total Amount Due \$ \_\_\_\_\_

Method of Payment:  Cash  Check  Visa  Master Card

Credit Card Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_ CVV2#: \_\_\_\_\_

Name on Card: \_\_\_\_\_