



MEMBERSHIP APPLICATION

✓ YES, I would like to invest in my business and community by joining the North of the River Chamber of Commerce

FIRM OR INDIVIDUAL NAME		CONTACT NAME		
BUSINESS ADDRESS		CITY	STATE	ZIP
MAILING ADDRESS		CITY	STATE	ZIP
OFFICE PHONE		MOBILE		
FAX	EMAIL		WEBSITE	
ALTERNATIVE REPRESENTATIVE		REFERRED BY		

I AM INTERESTED IN PARTICIPATING IN THE FOLLOWING COMMITTEES:

- | | | |
|--|--|---|
| <input type="checkbox"/> BUSINESS EXPO | <input type="checkbox"/> ECONOMIC CONFERENCE | <input type="checkbox"/> FALL COMMUNITY EVENT |
| <input type="checkbox"/> GOLF TOURNAMENT | <input type="checkbox"/> LEGISLATIVE | <input type="checkbox"/> MEMBERSHIP SOCIAL |
| <input type="checkbox"/> SCHOLARSHIPS | | |

MEMBERSHIP DUES

- | | |
|--|---|
| <input type="checkbox"/> \$30.00 SENIOR MEMBERSHIP (55 OR OLDER)
NON-BUSINESS | <input type="checkbox"/> \$75.00 CHARITABLE NON-PROFIT
PLEASE INCLUDE CURRENT STATUS OF NON-PROFIT |
| <input type="checkbox"/> \$150.00 SMALL BUSINESS
1 - 5 EMPLOYEES | <input type="checkbox"/> \$200.00 LARGE BUSINESS
6 - 25 EMPLOYEES |
| <input type="checkbox"/> \$300.00 CORPORATE MEMBER
26 - 50 EMPLOYEES | <input type="checkbox"/> \$25.00 REGISTRATION FEE
Business Membership Directory (ONE-TIME CHARGE) |

MAKE CHECKS PAYABLE TO: NORTH OF THE RIVER CHAMBER OF COMMERCE

PLEASE PROVIDE A BRIEF DESCRIPTION OF YOUR BUSINESS:
