



2024 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"/> AMBASSADOR	<input type="checkbox"/> FINANCE	<input type="checkbox"/> MEMBERSHIP
<input type="checkbox"/> BUSINESS DEVELOPMENT	<input type="checkbox"/> FUNDRAISING	<input type="checkbox"/> SCHOLARSHIP
<input type="checkbox"/> BYLAW & LEGISLATIVE	<input type="checkbox"/> MARKETING	

MEMBERSHIP DUES

<input type="checkbox"/> \$50.00 INDIVIDUAL MEMBERSHIP NON-BUSINESS	<input type="checkbox"/> \$100.00 NON-PROFIT ORGANIZATION PLEASE INCLUDE CURRENT STATUS OF NON-PROFIT
<input type="checkbox"/> \$150.00 SMALL BUSINESS 1 - 10 EMPLOYEES	<input type="checkbox"/> \$250.00 LARGE BUSINESS 11-24 EMPLOYEES
<input type="checkbox"/> \$350.00 CORPORATE MEMBER 25+ EMPLOYEES	<input type="checkbox"/> \$25.00 REGISTRATION FEE BUSINESS MEMBERSHIP DIRECTORY (ONE-TIME FEE)

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

PLEASE PROVIDE A BRIEF DESCRIPTION OF YOUR BUSINESS:
