

MEMBERSHIP APPLICATION

BUSINESS NAME: _____

TYPE OF BUSINESS: _____

Business Hours: _____ Website: _____

CONTACT PERSON: _____

ADDRESS: _____

Street

City

State

Zip

MAILING ADDRESS (If different): _____

Street

City

State

Zip

Business #: _____ Fax #: _____

Home #: _____ Email: _____

PLEASE INDICATE THE COMMITTEE OF YOUR CHOICE AND A BRIEF DESCRIPTION OF WHY YOU WOULD LIKE TO BE ON THAT COMMITTEE.

Ways and Means Committee

How to get the funds we need.

Planning Committee

Project development such as: begin property owner Lists, voter lists, etc. Inform them about the Mentone Mentone CC activities and voter registration efforts. Activities, community, fundraising.

I will be willing to assist on a committee if needed.

The Mentone Chamber of Commerce publishes information about our business members on our website and in a printed business directory that will be distributed freely.

I want my business' information published.

I do NOT want any of my business' information published.

Investment Schedule: (Check one)

_____ Family/Individual \$25.00

_____ Business \$25.00

Payment: _____ Cash

_____ Check#

Total Submitted: \$ _____

The Mentone Chamber of Commerce is dedicated to promote our local businesses and to insure that we remain a safe and desirable place to live.

Visit us at our website: <http://www.mentonechamber.com>