**Chesaning Chamber of Commerce**

**MEMBERSHIP APPLICATION**

(Please list information as you would like it to appear on the Chamber website or make notes for additional contact information)

**Membership Name:**

**Contact Person:**

**Mailing Address:**

**Location Address:**

**City, State, Zip:**

**Phone Number:**

**FAX:**

**E-mail Address:**

**Web Site:**

**Year Established:**

**Business Hours or Additional Information:**

\*\*\* Newsletters will be delivered electronically at email addresses listed above. \*\*\*

**Membership Levels: \_\_\_\_\_\_\_BUSINESS MEMBER ($350 Annual)**

 **\_\_\_\_\_ ASSOCIATE MEMBER ($90 Annual)** Non-Profits, Government, etc

 **\_\_\_\_\_ INDIVIDUAL MEMBER ($25 Annual)** For 1 person or a married couple

Dues for new members joining mid-year will be prorated. Dues year is from Jan. 1-Dec. 31.

**Or, please bill me: \_\_\_\_\_ Bi-annually \_\_\_\_\_ Quarterly \_\_\_\_\_ Monthly**

**SIGNATURE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_DATE\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**PayPal, Visa or Mastercard accepted. Please contact the office or use link on the website.**

**Chesaning Chamber of Commerce, 218 N. Front St. – Suite B, Chesaning, MI 48616**

**Phone: 989-845-3055 – Email: info@chesaningchamber.org**

**Thank you for your continued support of the Chesaning Chamber of Commerce!**