



Membership Application

Date _____

Company Name _____

Address _____

City _____ State _____ Zip _____

Type of Business or Service _____

Date Business Started _____

Primary Contact _____

Phone Number _____ Fax Number _____

E-mail _____ Website _____

Email is used as our primary form of communication with our members. If you do not access your email on a regular basis, please check here _____ and we will contact you through the US Postal system.

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ANNUAL DUES

Business\$125.00

Non Profit Organizations.....\$100.00

Churches, Clubs, Municipalities, Schools

_____ CHECK PAYABLE TO: **HILLSIDE-BERKELEY CHAMBER OF COMMERCE**

_____ CREDIT CARD # _____ EXP DATE _____

ZIPCODE ASSOCIATED WITH CREDIT CARD _____

SIGNATURE _____ DATE _____

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CHAMBER USE ONLY

YEAR JOINED _____

AMT PAID _____ CHECK # _____ DATE PAID _____

ADDED TO MEMBERSHIP LIST _____ PACKET _____
DECAL, CERTIFICATE, LETTER