Application for Business Membership Mead Area Chamber of Commerce

We hereby make application for Business Membership in Mead Area Chamber of Commerce. We acknowledge that the annual Business Membership investment is based on the number of salaried employees on our payroll. We have selected our annual membership fee as indicated in the membership fee scale in this Membership Application and Invoice.

Business Membership will be continuous unless we notify the Chamber to the contrary in writing. If accepted for membership, that membership will be effective, for a period of 12 months, from the first day of the month within which this Membership Application and payment are received. Annual membership fees will be billed as of the anniversary date of membership. We agree to adhere to the By-laws of the Mead Area Chamber of Commerce.

Date		
Company Name		
Business Address		
City, State, ZIP		
Mailing Address		_
City, State, ZIP		_
Business Telephone	FAX	
Representative	Title	
Email Address		
Representative	Title	
Email Address		
Description of Business/Organization:		
Referred By:		
\$ 50 Non-profits \$ 75 1-2 Employees \$100 3-5 Employees \$200 6-20 Employees \$300 21-100 Employees	Please make check payable to Mead Area Chamber of Commerce. Mail check and application to: P O Box 727 Mead, CO 80542	