

MEMBERSHIP APPLICATION

Date:	

Yes! I want to invest in the future of the Valley by supporting the Chamber's programs dedicated to supporting economic development and serving as a voice for all businesses in our region.

Business Name:				Established:	
Primary Contact Name:			Position: _		
Location Address:					
		Contact Direct I			
		Cell Ph			
		Contact email:			
		Twitter:			
		nula is similar to the yellow			
Number of Employees:	Full-Time:	Part Time:	(2	Part-Time = 1 Full-Time)
Additional Contacts to r	eceive Chamber I	Positio	n:		
		Positio email:			
Payment Type:	k (#) tance as a Memb elled in writing. Fo ny other payment contribution. I he	e time admin fee = Total MC Visa Amex Der of the Greater Valley Cor federal income tax purits to the Chamber, may be reby accept the terms and	Discover Dis	Monthly ACH (ask Commerce. I understand pership in the Greater V , as ordinary and necess above and am authoriz	I that membership is falley Chamber of sary business expenses ed to sign for the
	Select	Annı	ial Dues Amo		
		\$320 (1-5 Employees) \$370 (6-10 Employees)			<u> </u>
	_	1 2210 (0 TO FILIBIONEES)			1

\$480 (11-20 Employees)

21+, Banks, Universities, Utilities Contact the Chamber