



DEADLINE: Tuesday, March 5th, 2024

2024 Chamber of Commerce Membership Application Form

Business Name: _____

Current Mailing Address: _____

Owners Name: _____

Contact Phone Number: _____

Website: _____

Current email: _____

The chamber uses email as its primary communication source, if you do not want this, please let us know.

Membership (Please check the applicable membership)	Description	Dues per year
<input type="checkbox"/> Business	Examples: accommodations, restaurants, gas stations, marinas, grocery store, hardware store, pharmacy, auto body shops, and other shopping establishments.	\$125.00
<input type="checkbox"/> Nonprofit Organizations	Service clubs and organizations	\$75.00
<input type="checkbox"/> Individual	No association with business ownership	\$20.00

Method of Payment: Cheque Cash E-transfer: info@temagamiinformation.com
(please check one)

Signature: _____ Today's Date: _____

If you are submitting this form by email, a signature is not required because the email will serve as confirmation.
Otherwise, please sign and mail or return to office.
It is important that this form is returned so we can keep our records up to date.