

Clintonville Area Chamber of Commerce

2016 MEMBERSHIP APPLICATION

Business Name _____

Address _____

City _____ State _____ Zip _____

Mailing Address _____

(If different from above)

City _____ State _____ Zip _____

Type of Business _____

Owner/CEO _____

Contact Person _____

Business Anniversary- Month _____ Year _____

Phone _____ FAX _____

E-mail Address _____

Web Page _____

Full Time Employee _____ # Part Time _____

(Including owner) (Seasonal or less than 30 week)

Assets *(Financial Institutions Only)* \$ _____ Million

Would your business like to participate in the *Chamber Bucks* program?

Yes ____ **No** ____ *Chamber Bucks are sold in various denominations and are redeemable at Chamber member businesses only.

Would you like to be emailed Chamber updates & reminders periodically? If you would like to add employee email addresses to receive these reminders, place the addresses on the back of this form.

Yes ____ **No** ____



Clintonville Area Chamber of Commerce

1 S. Main Street Clintonville, WI 54929

Phone: 715-823-4606

E-mail: cvlchmbr@frontiernet.net

www.clintonvillewichamber.com

See Membership Investment Schedule to determine your business category.

Base Investment \$ _____

Employee Fee

(# Full Time x \$5.00) \$ _____

(# Part Time x \$2.50) \$ _____

I would like to become a Booster Member

Booster Members invest 25% or more beyond their fair share) Please add ____% to my total.

The Chamber will calculate your dues and invoice your business for the amount you owe. *(Yearly Chamber membership billing is done in December for the upcoming year. If joining any month after January your dues will be pro-rated for the number of months remaining in the current year, excluding Associate Memberships.)*

Method of Payment

() Full () Semi-Annual () Quarterly

Billing Contact Person _____

(If different from other side)

Billing Address _____

(If different other side)

City _____ State _____ Zip _____

Signature _____

Date _____

I am interested in serving on the following Chamber Committees:

Caps & Corks Golf Outing Christmas

Girls Go Cruisin' Fall Frenzy

FOR OFFICE USE ONLY:

BB EX WC
 CC NA WS
 EM SCC SLN

Join Date: _____