

# **2010 MEMBERSHIP APPLICATION**

(PLEASE PRINT OR TYPE)

DATE \_\_\_\_\_ NEW \_\_\_\_\_ RENEWAL \_\_\_\_\_ (Referred by \_\_\_\_\_)

COMPANY NAME \_\_\_\_\_

STREET ADDRESS \_\_\_\_\_

CITY/STATE/ZIP CODE \_\_\_\_\_

WEB-SITE (FREE LINK !) \_\_\_\_\_

MAILING ADDRESS (IF DIFFERENT FROM ABOVE) \_\_\_\_\_

CONTACT PERSON(S) \_\_\_\_\_

TITLE(S) \_\_\_\_\_

PHONE \_\_\_\_\_

FAX \_\_\_\_\_

E-MAIL \_\_\_\_\_

## **(FOR CHAMBER CORRESPONDENCE)**

TYPE OF BUSINESS \_\_\_\_\_ YEARS IN BUSINESS \_\_\_\_\_

TOTAL NUMBER OF EMPLOYEES \_\_\_\_\_

## **CIRCLE INVESTMENT WHICH APPLIES**

NUMBER OF EMPLOYEES YEARLY DUES

Individual, or 1 – 10

\$100.00

11 - 25

\$150.00

26 - 50

\$250.00

51 - 99

\$350.00

100+

\$450.00

Churches/Not-for-Profit \$100.00

Schools/Government \$150.00

Utilities \$250.00

\_\_\_\_\_ CHECK/MONEY ORDER

NUMBER \_\_\_\_\_

Make check/money order payable to:

**Melrose Park Chamber of Commerce**

Please mail Membership Application and payment to:

\_\_\_\_\_ VISA \_\_\_\_\_ MASTERCARD

EXPIRATION DATE \_\_\_\_\_

ACCT. # \_\_\_\_\_

Signature \_\_\_\_\_

## **MELROSE PARK CHAMBER OF COMMERCE**

**900 N. 25<sup>th</sup> Ave., MELROSE PARK, IL 60160**

*THANK YOU FOR SUPPORTING THE CHAMBER'S EFFORTS !!*

*WE WILL MAKE OUR COMMUNITY A BETTER PLACE TO WORK, LIVE, AND DO BUSINESS.*

**NOTE: Membership expires December 31, 2010**