



Chamber Membership Application 2008

Please mail or fax to: Eastern Maumee Bay Chamber of Commerce
2460 Navarre Ave., Oregon, Ohio 43616 Phone (419) 693-5580; Fax (419) 693-9990

Date: _____

Name of Business _____

Street Address _____

City _____ State _____ Zip _____

Phone _____ Fax _____ Web site _____

INFORMATION FOR MEMBERSHIP DIRECTORY & MAILING LIST

Contact person _____

Title/Position _____

Phone, if different from above _____ E-mail _____

BRIEF DESCRIPTION OF YOUR BUSINESS.

| 2008 Membership Dues Structure | |
|---|----------|
| Please Circle Dues Level | |
| Membership Category | |
| Senior Personal Membership <small>60+ yrs of age Non-Business. No Company references</small> | \$ 50.00 |
| Supporting Personal Membership <small>Under 60 yrs of age. Non-Business. No Company references</small> | \$ 75.00 |
| Franchise Membership <small>Any Manager of a franchise opting to be a member of the Chamber</small> | \$ 75.00 |
| 1-5 Full Time Employees <small>Company Name Reference</small> | \$135.00 |
| 6-25 Full Time Employees <small>Company Name Reference</small> | \$185.00 |
| Banks/Savings and Loans <small>Company Name Reference</small> | \$185.00 |
| 26+ Full Time Employees <small>Company Name Reference</small> | \$375.00 |

of Full Time Employees _____

- Payment Enclosed
- Please Invoice
- Credit Card

Name as on Credit Card:

Card Number:

Expires _____

Signature _____