



# 2020 Membership Application

15 South Broad Street  
 Norwich, NY 13815  
 Ph: 607-334-1400  
[www.commercechenango.com](http://www.commercechenango.com)

Date \_\_\_\_\_

Business/Organization Name \_\_\_\_\_

Main Contact \_\_\_\_\_ Billing Contact: \_\_\_\_\_

Number of Employees: (include yourself) NOTE: 2 part time = 1 full time \_\_\_\_\_

Business Category \_\_\_\_\_ Annual Membership: \$ \_\_\_\_\_

Physical Address \_\_\_\_\_

Mailing Address \_\_\_\_\_

Telephone # \_\_\_\_\_ Fax # \_\_\_\_\_

Web Site Address \_\_\_\_\_ E-Mail Address \_\_\_\_\_

Other Social Media Sites \_\_\_\_\_

Why did you join? \_\_\_\_\_

What business needs can The Chamber help you with? \_\_\_\_\_

Please provide a 25 word desc. of your business for website search purposes. \_\_\_\_\_

\_\_\_\_\_  
 \_\_\_\_\_

# Employees	Dues Amt	Dues for 501c3
*(Friend of the Chamber)	*\$114	-
1-4	\$266	\$204
5-14	\$342	\$261
15-24	\$389	\$296
25-34	\$448	\$341
35-49	\$625	\$475
50-75	\$766	\$561
76-124	\$1060	\$561
125-249	\$2545	\$561
250-499	-	\$606
250-999	\$4454	-
500+	-	\$2035
1000+	\$6361	-

*Friend of the Chamber* is limited to individuals or community members who wish to be an active part of our work. The listing will show first and last name of the individual or community member.

Credit Card Information—

Can also be paid on online at [www.commercechenango.com](http://www.commercechenango.com)

Master Card  VISA  Discover  American Express

Name as it appears on card:

Address: \_\_\_\_\_

Credit Card #: \_\_\_\_\_

Expiration: \_\_\_\_\_ CVV Code: \_\_\_\_\_

Signature \_\_\_\_\_