

2016-2017 Chamber Membership Application

*** = Required Field**

Business and Contact Information

* Name of Business _____

* Contact Person _____

* Physical Location _____

* City/State _____ * Zip Code + * 4 digits _____

* Mailing Address _____

* City/State _____ * Zip Code + * 4 digits _____

* Business Phone _____ Alternate/Cell Phone _____ Toll Free _____

* E-Mail Address _____ * Website Address _____

Who referred you? _____

Do you have Facebook? _____ Do you have Twitter? _____

Name, Mailing Address and E-Mail Address of ADDITIONAL recipient of the Monthly Chamber Newsletter and Weekly E-blast (up to 2):

Please complete the following sections for your listing on www.bemidji.org

* Log In Name _____

* Log In Password _____

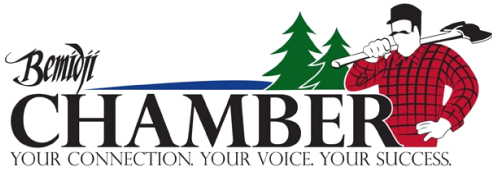
* Brief Description of your business (200 characters/30 words or less)

* Choose up to 6 separate “key words” to describe your business

* General Business Category Listing on www.bemidji.org (Circle One)

- | | | |
|---|--|---|
| <ul style="list-style-type: none"> Advertising & Media Agriculture, Fishing & Forestry Arts, Attractions & Entertainment Automotive & Marine Business & Professional Services Computers & Telecommunications Construction Equipment & Contractors Employment & Economic Development Family, Community & Civic Organizations Finance & Insurance | <ul style="list-style-type: none"> Government, Education & Individuals Hardware, Convenience Store, Farm Supplies Health Care & Services Home Building, Furnishings & Landscapes Industrial Supplies & Services Legal Lodging & Travel Manufacturing, Production & Wholesale Marketing & Design Personal Services & Care | <ul style="list-style-type: none"> Pets & Veterinary Promotional Products Public Utilities & Environment Real Estate & Relocation Religious Organizations Restaurants, Food & Beverages Shopping & Specialty Retail Sports & Recreation Storage & Rental Transportation |
|---|--|---|

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300 Bemidji Avenue — PO Box 850 — Bemidji, MN 56619-0850

Phone: (218) 444-3541 or (800) 458-2223

Fax: (218) 444-4276 — Website: www.bemidji.org

2016-2017 Chamber Membership Application Continued

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Please include additional representatives from your company

(i.e.: Billing Representative, Human Resources, Account Representative, etc)

1. _____
2. _____
3. _____
4. _____
5. _____

Membership Dues

* # of Full Time Equivalent Employees _____

* Please circle ONE of the following categories:

General Membership Classification

Financial Depository

Lodging Classification

\$200 Second Business Membership

\$60 Individual Supporting Member

Associate Membership

Please circle if you would like to take advantage of any of the following options:

30% Non-Profit Discount

\$20 Logo Placement on
www.bemidji.org

\$170 Enhanced Business Listing on
www.bemidji.org

Total Dues Investment.....\$_____

*Investor Signature _____ *Date _____

**Thank you for your investment in the
Bemidji Area Chamber of Commerce**

YOUR CONNECTION. YOUR VOICE. YOUR SUCCESS.

For more information on how you can become involved in the chamber
visit www.bemidji.org or contact us at 218-444-3541.

For Office Use Only

Please Invoice for \$ _____ Date Paid: _____ Check #: _____

Credit Card Information: # _____ Expiration Date: ____/____

3-Digit Code: _____

Emailed JPG Logo to Chamber (Circle One)

Yes No