

2019 MEMBERSHIP Application Form

Stony Plain & District Chamber of Commerce

Membership Effective January 1, 2019 to December 31, 2019

STONY PLAIN
& DISTRICT
CHAMBER of COMMERCE



Business Name _____ Numbered Company _____

Rep #1: _____ Email: _____ Contact Billing

Rep #2: _____ Email: _____ Contact Billing

Phone (Bus) _____ Phone (Alt) _____ Fax _____

Business Street Address: _____ City: _____

Prov _____ Postal Code: _____ General Email: _____

Mailing Address (if different) _____

City: _____ Prov _____ Postal Code: _____

Website: _____

Years in Business _____ Number of Employees _____ (incl. all F/T employees; Two P/T employees constitute one F/T)

Business Category: _____ Business Description: _____

DO NOT publish the following information*: _____

CONSENT REQUIRED (if you leave this section blank, you will NOT be listed on the on-line business directory, in the Chambers Community Directory (phonebook), or on chamber email distribution lists.)

Publication: Authorization to include my business information on the Chamber Website and the Chambers Community Directory: **YES** (*I have indicated any information not to be published above) **NO** please do not publish any of my information

Anti-Spam Legislation: Members will receive monthly e-newsletters and other e-notices regarding meetings, education sessions and events. By checking the box below, you give consent to receive electronic chamber correspondence.

I give my consent to electronically receive general chamber e-newsletters, meetings and event information

Authorized Signature: _____ Date: _____

MEMBERSHIP FEE SCHEDULE 2019 (includes 5% GST)

Fee for the current year is based on the number of employees (two half time employees = one full time) and the period during which this application is submitted. The fee covers your membership from the date your application is approved to **December 31, 2019**. All renewing memberships for the following year will be invoiced at the *Annual* rate established for that year.

# of Employees	Annual January 1 to December 31	Pro-Rated April 1 to December 31	Pro-Rated July 1 to December 31	Pro-Rated October 1 to December 31
1 to 5	\$126.00	\$ 94.50	\$ 63.00	\$ 31.50
6 to 50	\$189.00	\$141.75	\$ 94.50	\$ 47.25
50 +	\$315.00	\$236.25	\$157.50	\$ 78.75
Personal/ Retired	\$ 81.90	\$ 61.43	\$ 40.95	\$ 20.48
Clubs/ Societies	\$ 81.90	\$ 61.43	\$ 40.95	\$ 20.48

Includes \$12.75 + GST for Alberta & Canadian Chambers of Commerce Membership.

Total Fee (GST #1080344141) _____

Method of Payment

Debit

Cheque # _____

Visa Card # _____

M/C # _____

Cardholder Name _____

Expiry Date: _____

Authorized Signature: _____

Date Paid: _____

Stony Plain & District Chamber of Commerce
4815 - 44 Avenue, Stony Plain, AB T7Z 1V5
Phone: 780.963.4545 Fax: 780.963.4542
info@stonyplainchamber.ca
www.stonyplainchamber.ca

Office Use Only:

Date Received: _____ Chambermaster Sage 50 Certificate Initial: _____