



# Rhinelanders Area Chamber of Commerce Membership Investment Registration and Agreement



**Company Information:** Please list mailing and billing addresses, if different than physical address.

Company Name:	
Physical Address:	City, State, Zip:
Mailing Address:	City, State, Zip:
Billing Address:	City, State, Zip:
General Phone:	General Email:
Website:	Social Media: <input type="checkbox"/> Facebook <input type="checkbox"/> Instagram

**Company Reps:** Please list those within your organization you would like to receive e-mail correspondence on Chamber events, programs, etc. Please indicate if you have a specific billing rep other than the primary rep.

Name	Title	Direct Email Address	Direct Phone
Primary:			

**Membership Category:** Please see page one for descriptions. Only check one.

<input type="checkbox"/> Standard Business	<input type="checkbox"/> Lodging Facility	<input type="checkbox"/> Civic Member
<input type="checkbox"/> Sole Proprietor	<input type="checkbox"/> Home Based	<input type="checkbox"/> Associate Member

**Directory Listing:** Please list up to two categories that your business will be displayed in on the Website and Area Guide Directory.

Primary Category:	
Secondary Category:	

**Business Description:** Please provide us with additional information about your business as you are able.

Brief Overview of Business:		
Number of FTE Employees:	Number of Rooms:	Number of Campsites:

**Membership Investment:** Please fill in with appropriate values.

Base Annual Membership Investment	\$
Additional Lodging Facility Investment	\$
<b>Total Investment</b>	\$

**I am interested in learning more about:**

- Sponsoring an Event
- Chamber Volunteering
- Advertising in the next Area Guide

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

<i>For office use only-</i>	
Member Join Date:	Membership Investment:
DB/CLING/HH/FB/CC/PC/QB	