**Business Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Business Phone:** (\_\_\_\_\_\_) -\_\_\_\_\_\_-\_\_\_\_\_\_\_

**Email address:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Other Phone:** (\_\_\_\_\_\_) -\_\_\_\_\_\_-\_\_\_\_\_\_\_\_\_

**Mailing Address:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Fax Number:** (\_\_\_\_\_\_) -\_\_\_\_\_\_-\_\_\_\_\_\_\_\_\_

**Physical Address (if different):** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Primary Member’s Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Secondary Member’s Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Website Address:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Type of Business:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please ✔ (check) the category of membership for you.

* **$50.00** Nonprofit Organization or Non-Business Individual or Couple
* **$60.00** A business with 1-10 employees
* **$100.00** a business with 11 or more employees
* **$50.00** Business Card and/or Logo Advertisement in one or all of the following (Newsletter, Website, and/or Chamber Brochure).

Dues Enclosed: $ \_\_\_\_\_\_\_\_\_\_\_\_\_

Business Card and/or Logo Advertisement: $ \_\_\_\_\_\_\_\_\_\_\_\_\_

Student Scholarship Fund (Payable to school of student’s choice upon enrollment): $ \_\_\_\_\_\_\_\_\_\_\_\_\_

Winston Beautification Fund: $\_\_\_\_\_\_\_\_\_\_\_\_\_

**Total Enclosed: $** **\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Please make checks payable to: Winston Area Chamber of Commerce**

***New members joining between July 1st and October 1st will pay half of the year’s dues. Any full year’s dues paid after November 1st shall cover the following calendar year. Once dues are paid a member may vote, hold office, and be considered a member in good standing.***

***Memberships are automatically cancelled if dues are not paid by March 15th. The Chamber Board has the right to waive any or all dues.***

***Please initial by all that are applicable***

\_\_\_\_\_\_\_\_\_\_\_ I’d like to receive notices of Chamber events and activities.

\_\_\_\_\_\_\_\_\_\_\_ I hereby permit the Winston Chamber of Commerce to give other members my mailing address.

**Terms of Agreement and Membership**

By signing this application and agreement you state that you understand the terms and conditions. You agree to pay the applicable dues. You also agree that you understand what is expected of both the Chamber of Commerce and the member of it.

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

Signature of Individual or Business Owner and/or Representative Date