



FORESTPORT CHAMBER OF COMMERCE, INC.
2016 Membership Application

Business Organization Individual
\$35 Annual Fee for 2016

Contact Information (For Our Records Only):

Name: _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Contact Phone #: _____

Home Work Cell Best Time to Call _____

Business/Organization Information (For Chamber, Member Listing, and Other Events):

Business Name: _____

Person to Contact: _____

Business Address: _____

City: _____ State: _____ Zip Code: _____

Business Phone #: _____ Fax #: _____

Website/Facebook: _____

Business Email: _____

Category of Business (Example: Diner, Bar & Grill, Convenient Store, Etc.): _____

Tagline: _____

Please send payment to: Forestport Chamber Of Commerce Inc.
P.O. Box 142
Forestport, NY 13338

For questions, call 315-793-7714 Email: forestportchamber.org Or just visit us at:

forestportchamber.org