



# MEMBERSHIP APPLICATION FORM

Geraldton District Chamber Of Commerce

Organization		
Street Address		
		Postal Code
Mailing Address		Postal Code
Telephone	Cell:	Fax:
Email		
Website		
Main Contact		

DESCRIPTION OF BUSINESS			

**2014 Membership Fee Schedule: \$100.00 per calendar year**  
**Home based/single entity fee: \$50.00 per calendar year**

Signature Of Applicant:	Date:

FOR OFFICE USE ONLY			
MEMBERSHIP #	<input type="text"/>		
RENEWAL MONTH	<input type="text"/>	PLAQUE	<input type="checkbox"/> YES <input type="checkbox"/> NO
INSURANCE PLAN	<input type="checkbox"/>	MEMBER CARD	<input type="checkbox"/> YES <input type="checkbox"/> NO

<b>Payment Option:</b>
Cash
Cheque/MO
Visa:

<b>COMMITTEE INTEREST</b>
<b>REASON FOR JOINING</b>

*Approved By The Board Of Directors For The  
Geraldton Chamber Of Commerce*

\_\_\_\_\_

Date

\_\_\_\_\_

Signature

\_\_\_\_\_

Referred By:

\_\_\_\_\_

P.O. Box 128 Geraldton Ontario Canada P0T-1M0

E-Mail: [chamber@geraldtonchamber.com](mailto:chamber@geraldtonchamber.com)

AFFILIATIONS-NW ONTARIO ASSOCIATED CHAMBER OF COMMERCE, ONTARIO CHAMBER OF COMMERCE, CDN CHAMBER OF COMMERCE

<http://www.geraldtonchamber.com>

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