



## MEMBERSHIP APPLICATION

**Business Name** \_\_\_\_\_

**Mailing Address** \_\_\_\_\_

**City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip** \_\_\_\_\_

**Business Street Address** \_\_\_\_\_

**City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip** \_\_\_\_\_

**Website** \_\_\_\_\_

**Email** \_\_\_\_\_

**Phone** \_\_\_\_\_ **Fax** \_\_\_\_\_

**Owner(s) Name** \_\_\_\_\_

**Contact Name** \_\_\_\_\_

**Business Directory Listing Information, type of business/ services provided**

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

### Membership Type (see dues structure page)

\_\_\_\_\_ Primary Business Member  
\$250.00 per year

\_\_\_\_\_ Secondary Business Member  
\$125.00 per year

\_\_\_\_\_ Dual Member  
\$100.00 per year

\_\_\_\_\_ Associate Member  
\$85.00 per year

\_\_\_\_\_ Premium Associate Member  
\$250.00 per year

**Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

Chamber of Commerce membership dues may be deductible as an ordinary and necessary business expense.



## BUSINESS PROFILE

We are very interested in your business and look forward to having you as a new member! To better serve you, the community, and visitors to our area, we would appreciate you taking a few minutes to answer the following questions. Please feel free to attach additional information if required.

**What type of business, product, or service do you provide?**

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**What are your business Hours? Please include dates of operation.**

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**Are you open year round?** \_\_\_\_\_

**How would you like the Chamber to meet your needs and expectations?**

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**Would you be interested in volunteering for committees or events? List specific areas of interest.** \_\_\_\_\_

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Please send a .jpg or .png copy of your business logo to [info@irchamber.com](mailto:info@irchamber.com) for display on our website member profile page and for future Chamber publications.