



# MEMBERSHIP APPLICATION

To the Chamber of Commerce Board of Directors

We accept the opportunity to make Milton-Freewater a better place to do business and a better place to live. In doing so, we subscribe \$\_\_\_\_\_ as our annual investment in the category of \_\_\_\_\_ (refer to investment schedule).

Membership Name \_\_\_\_\_

Address \_\_\_\_\_

Phone Number \_\_\_\_\_ Fax Number \_\_\_\_\_

Email Address \_\_\_\_\_ Website Address \_\_\_\_\_

Business Principal Person \_\_\_\_\_ Title \_\_\_\_\_

2nd Key Member \_\_\_\_\_ Title \_\_\_\_\_

Number of Employees \_\_\_\_\_ How long have you been in business? \_\_\_\_\_

Please write a brief description of you/your business or organization. This information will be used in our "New Members" section of the Chamber Newsletter, website and our referral system. If more space is needed, please use additional paper.

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

What do you hope your Chamber will do for you?

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

Many committees are already working for you. In which areas could you participate and assist?

\_\_\_ Legislative/Government

\_\_\_ Special Events

\_\_\_ Tourism

\_\_\_ Agriculture

\_\_\_ Business Enhancement

\_\_\_ Membership

\_\_\_ Economic Development

\_\_\_ Marketing

\_\_\_ Workshops/Seminars

I/We have a vital interest in the mission of the Chamber of Milton-Freewater to enhance and promote economic vitality and quality of life in our community.

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

Send to: MF Chamber of Commerce, 157 S Columbia, Milton-Freewater, OR 97862