

# Member Application

Thank you for your interest in joining the Greater Gardner Chamber of Commerce. Your investment in the Chamber becomes effective with the completion of this application, payment of your investment as defined by our Membership Investment Schedule, and approval by the Board of Directors. Your renewal will be automatically invoiced on an annual basis unless advised otherwise by a member of your organization.

## Business Information

Company Name: \*

Phone: \*

Website:

Email: \*

Business Description (200 char max):

Directory Category:

 ▼

Employees: \*

Full-time

Part-time

Business Keywords (enter a space between words):

Comments / Questions:

## Physical Address

Line 1: \*

Line 2:

City: \*

State: \*

Postal Code: \*

Country: \*

### Mailing Address

☐ Same as physical address

Line 1:

Line 2:

City:

State:

Postal Code:

Country:

### Social Networking:

LinkedIn

Facebook

## Primary Contact Information

First Name: \*

Last Name: \*

Title:

Phone: \*

Cell Phone:

Fax:

Email: \*

### Contact Preference:

- ☐ Email  
☐ Phone

Login: \*

Password: \*

Check Availability

### Social Networking:

LinkedIn

Facebook

### Address

☐ Same as Member Address

Line 1: \*

Line 2

City: \*

State: \*

Postal Code: \*

Country: \*

United States

▼

Billing Contact Information

☐ Same as Primary Contact

First Name: \*

Last Name: \*

Title:

Phone: \*

Cell Phone:

Fax:

Email: \*

Contact Preference:

- ☐ Email
- ☐ Phone

Login: \*

Password: \*

Check Availability

### Social Networking:

LinkedIn

Facebook

### Address

☐ Same as Member Address

Line 1: \*

Line 2

City: \*

State: \*

Postal Code: \*

Country: \*

 

### Membership Options

#### Payment Option:

☐ Bill me

☒ Charge my credit or debit card



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