

Application for Long County Chamber of Commerce Membership

To the Long County Board of Directors:

Application is hereby made for an annual membership in the Long County Chamber of Commerce beginning _____, 2008 through June 30th, 2009.

Business, Individual, or Couple Name: _____

Address: _____

City: _____ State: _____ Zip code: _____

Phone Number: _____ Fax Number: _____

Email: _____ Web site: _____

Businesses Only

Business Description: _____

of Full-time Employees: _____ Business Phone Number: _____

Primary Representative: _____ Title: _____

Secondary Representative: _____ Title: _____

Billing Address if other than above: _____

City: _____ State: _____ Zip code: _____

of Years in Business: _____

Please check one:

- | | |
|--|---------------|
| _____ Individual | \$25.00/year |
| _____ Couples | \$40.00/year |
| _____ Business Membership (1-5 employees) | \$50.00/year |
| _____ Business Membership (5-10 employees) | \$75.00/year |
| _____ Business Membership (10+ employees) | \$100.00/year |