

2016 Membership Application

Return this completed form with your membership payment

Membership Year: January 1, 2016 - December 31, 2016

....

Business/Organiz	ation:		·····
Contact Name:		_	
Address:			
City/State/ZIP:			
Phone:		Fax:	
E-mail:			
Your e-mail address will not l	by shared. It is used only to	send meeting reminders	and other information on behalf of the Chamber
	<u>hip</u> : \$225.00 plus \$5.0 <u>ew Business</u> : One half o ns : \$425.00		ship for first year
	zations & Association	ns: \$100.00	
		_	

Checks payable to: Baudette-Lake of the Woods Chamber of Commerce PO Box 659, Baudette, MN 56623