

# Lincoln County

## Chamber of Commerce

2010 Membership Application

Please accept the below named business, organization, or individual as a 2010 member of the Lincoln County Chamber of Commerce. The following information is given for use in all Chamber mailings.

Name \_\_\_\_\_

Street Address \_\_\_\_\_

Mailing Address (if different) \_\_\_\_\_

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

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

Email \_\_\_\_\_ Web Site \_\_\_\_\_

Owner/Manager \_\_\_\_\_

Type of Business \_\_\_\_\_

Year Established \_\_\_\_\_ # of Employees \_\_\_\_\_ Type of Membership: New \_\_\_\_\_ Renewal \_\_\_\_\_

Dues Schedule : Count All employees (2 part-time = 1 full time).

1-5 Employees	\$75	6-25 Employees	\$125	26-50 Employees	\$175
51-100 Employees	\$300	101-249 Employees	\$425	250+ Employees	\$850
Non-profit	\$60	Individual Membership	\$50		

Dues amount enclosed \$ \_\_\_\_\_

\*Only the contact person will be eligible to vote on Chamber Business

\*This application must be completed in full and submitted with dues.

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

Comments/Suggestions: \_\_\_\_\_

Business Description for Website (up to 25 words): \_\_\_\_\_