



2017 Grand Lake Area Chamber

MEMBERSHIP APPLICATION

About Your Business:

Business Name: _____

Business Category: _____

Owner Name: _____

Billing Contact: _____

Email: _____

Phone: _____

Cell: _____

Physical Address: _____

Mailing Address: _____

Website: _____

Send me my online login information (Yes/ No)? _____

Business Description for Chamber Website (Limit 200 Characters) _____

Membership Costs:

\$275 Primary Business Investment \$ _____

\$200 Second Business Investment \$ _____

\$100 Third Business Investment \$ _____

\$150 Non-Profit Investment \$ _____

Grand Lake Area Chamber of Commerce
14700 US Hwy 34 | PO Box 429
Grand Lake, CO 80447
970.627.3402

\$200 Artist \$ _____

\$50 Friend of the Chamber (no business/organization affiliation) \$ _____

Member Upgrades (Please Detail) \$ _____

Total: \$ _____

Preferences:

Preferred Contact Method (Email/ Phone/ In Person): _____

Do you wish to receive Chamber updates via email? _____

How frequently would you like to meet with a Chamber marketing representative about your business?

Social Media:

Facebook: _____

Twitter: _____

LinkedIn: _____

Payment Information:

_____ Check Enclosed: Check Number _____ Check Amount: \$ _____

_____ Credit Card: Visa _____ MasterCard _____

Credit Card Number _____ - _____ - _____ - _____ Exp. Date _____

Three Digit V-Code (on back): _____ Card Holder Name: _____

Card Holder Signature: _____ Date: _____

*Please be advised, your membership will not be active and company information added to the website until the Chamber has been paid in full unless a payment arrangement has been made. Payment arrangements for four month periods will be authorized by speaking to the Executive Director. Only pre-authorized Credit Card Payments will be accepted.

Please charge my card on the first Tuesday of every month for **two** months in the amount of

\$ _____ per month.

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