

# Hammondsport Chamber of Commerce 2011 Membership Application

## Applicant Information:

Business/Name: \_\_\_\_\_

Owner: \_\_\_\_\_ Contact: \_\_\_\_\_

**Mailing** Address: \_\_\_\_\_

**Business** Address: \_\_\_\_\_  
(Physical)

**“Off-Season”** Address: \_\_\_\_\_  
(please specify timeframe when this address is used)

Phone number(s): \_\_\_\_\_ E-mail: \_\_\_\_\_

Fax: \_\_\_\_\_ Web Site: \_\_\_\_\_

**Description of applicants business or organization.** Please include your principle product or service. You may enclose a brochure or additional pages so that we fully understand your product.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## Dues Calculation:

### Regular Membership

- Business or organization with 0 employees ..... \$125.
- Business with under 25 employees (1-24).....\$165.
- Business with 25 – 100 employees .....\$195.
- Business with over 100 employees .....\$230.

### Associate Memberships (May not vote or hold office)

- Not for Profit Charitable, Art, Educational..... \$60.
- Individual Sponsor: (non business individual only)..... \$45.

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

Please complete and return application with dues payable to:  
**Hammondsport Chamber of Commerce**  
**PO Box 539**  
**Hammondsport, NY 14840**