

## Rockford-Greenfield Area Chamber of Commerce Membership Application

Business Name				Date	
Business Phone					
Business Fax					
Business E-mail					
Web Site					
Contact Preference	<input type="checkbox"/> E-mail	<input type="checkbox"/> Phone	<input type="checkbox"/> Mail	<input type="checkbox"/> Fax	
Number of Employees	Full-time		Part-time		
Business Operations	Business Hours		Business Days	M <input type="checkbox"/>	T <input type="checkbox"/> W <input type="checkbox"/> R <input type="checkbox"/> F <input type="checkbox"/> Sa <input type="checkbox"/> Su <input type="checkbox"/>

Primary Contact Name	E-mail	Phone	
Address	City	State	Zip Code
Secondary Contact Name	E-mail	Phone	
Address	City	State	Zip Code

Business Description (200 Character maximum)

Membership Level
<input type="checkbox"/> \$100 Full Membership: Includes voting privileges and link on Chamber's web site
<input type="checkbox"/> \$50 Associate/Individual Membership: Includes name on Chamber web site. No voting privileges.

***Please include payment with application form and submit to Rockford-Greenfield Area Chamber of Commerce, 6031 Main St., Rockford MN 5373***