

Solümbia Shamber of Commerce

APPLICATION FOR CHAMBER MEMBERSHIP

Name of business:	
Address:	
Phone: Website:	
E-mail address:	
Type of business:	
Contacts (up to 3 available with business membership:	
THE AND ASSESSED AND THE PARTY OF THE MONTH	
REGULAR MEETINGS ARE HELD ON THE THIRD WEDNESDAY OF EACH MONTH.	
Please check one of the following:	
Individual Membership: (residency within	\$60.00
5 miles of Columbia, IL required).	
Business Membership: (business location	\$85.00 for first member
within 5 miles of Columbia, IL required).	\$60.00/additional member (max. 3)
Ait Manushamak	\$85.00
Associate Membership * (no residency or business requirement)	Φ03.00

Dues are payable in January of the current year. Dues for current year and for new members approved after April 1st shall be pro-rated on a monthly basis for the balance of that calendar year. Additional copies of this application can be obtained from the Columbia Chamber of Commerce's website at www.columbiailchamber.com.

THIS IS AN APPLICATION ONLY AND DOES NOT AUTOMATICALLY ENSURE ACCEPTANCE INTO THE CHAMBER OF COMMERCE.

* Associate members will have the rights, benefits, and privileges and pay the same dues as other members, except that an associate member and/or their representatives may not vote nor hold elective office.

Please mail completed application and check payable to "Columbia Chamber of Commerce" to:

COLUMBIA CHAMBER OF COMMERCE

P.O. BOX 176

COLUMBIA, ILLINOIS 62236

Phone Inquiries: John Conrad, Secretary-618-281-8000-Conrad Press, Ltd.

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