



## Company Profile

Please fill out and return this form to the Chamber office. It is important that we have up-to-date and correct information on your organization to effectively serve you.

Company Name \_\_\_\_\_

Physical Address \_\_\_\_\_

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

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

Mailing Address \_\_\_\_\_

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

Billing Address (if different than above) \_\_\_\_\_

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

Owner/Operator \_\_\_\_\_

Email \_\_\_\_\_ Phone \_\_\_\_\_

Primary Contact (if different than above) \_\_\_\_\_

Email \_\_\_\_\_ Phone \_\_\_\_\_

No. of Employees: Part-Time \_\_\_\_\_ Full Time \_\_\_\_\_

Year established \_\_\_\_\_ Hours of operation \_\_\_\_\_

Please give a brief description of your business and the products and services you offer.

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The following information is for your listing in the Business Directory on the Chamber website, along with your Company Name, Address, and Phone Number.

*We will also "like" your Facebook page, if we have not already.*

Email \_\_\_\_\_ Website \_\_\_\_\_

Social Media URL \_\_\_\_\_

Other Link/Additional URL \_\_\_\_\_

Please choose up to **3** Categories/Subcategories to be listed under from the enclosed "Business Directory Categories" sheet.

*(Subcategories will only be used if there are several listings under the same category for easier filtering -at the Chamber's discretion)*

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_ (\$5 per add'l per yr.) \_\_\_\_\_

Are you interested in including your logo and 150 word description for only \$15.00/year? \_\_\_\_\_

Please include email addresses of other employees who may like to receive our monthly newsletter, spotlight e-blasts, upcoming events, and any other mailings distributed to the entire membership (This is a great marketing tool!).

Name	Email Address
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
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Our new Member 2 Member Discount Program gives you and your employees an opportunity to save at your fellow member businesses. To take advantage of the discounts offered, you will need to present your Chamber Member card at the participating merchant. Participation is FREE!

We will send you enough cards for you and your staff. Are intereted in participating in our M2M Discount Program? ☐Yes ☐No

Our new RxCut Drug Discount Program allows you and your employees to save BIG on your prescriptions.

We will send you enough cards for you and your staff. Are intereted in participating in our Rx Discount Program? ☐Yes ☐No

We invoice yearly dues by anniversary date. To inquire or to change your yearly dues schedule, contact the Chamber office. Pleae keep in mind, to keep membership current, payment is due upon reciept. Failure to pay within 90 days will result in terminated membership.

*(If you are interested in Bi-Annual or Quarterly billing, please contact us.)*

**\*\*For businesses who pay within 30 days of the invoice date, we will recognize you as a renewing member in the following months newsletter.**

Any additonal notes \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signed by \_\_\_\_\_ Date \_\_\_\_\_