



**MELROSE**  
Chamber of Commerce

**Application for Membership**

*Please complete this form and return it with payment.*

**Company Name:**

**Address:**

**City:**

**State:**

**Zip Code:**

**Phone Number:**

**Principal Contact:**

**Title:**

**Email Address:**

**Web Site:**

**Business Twitter Handle and/or Facebook Page:**

**Number of Employees:**

**Please give a brief description of your business:**

**Primary reasons for joining the Melrose Chamber of Commerce: (Please check all that apply)**

- Gift Certificate Program**
- Networking Opportunities**
- Listing in the Chamber Directory**
- Advertising Opportunities**
- Support of Community Organizations**
- Community Involvement**
- Member-to-Member Discounts**
- Staying informed on business and community issues**

**Will you offer Chamber Members discounts? If yes, what is your discount?**

**Membership Dues**

<b><u>Business Type</u></b>	<b><u>Annual Dues</u></b>
<b>1 Employee</b>	<b>\$125</b>
<b>Business: 2-10 Employees</b>	<b>\$225</b>
<b>Business: 11+ Employees</b>	<b>\$325</b>
<b>Financial Institution</b>	<b>\$500</b>
<b>Hospital</b>	<b>\$500</b>
<b>Utility Company</b>	<b>\$500</b>
<b>Personal Member: Non-Business</b>	<b>\$95</b>
<b>Club/Civic Organization</b>	<b>\$95</b>

**Enclosed is a check for Membership dues, with the understanding that this membership is renewed annually unless written notice is provided of intent to resign at least 30 day prior to renewal date. (Please Initial here: \_\_\_\_\_)**

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**Printed Name and Signature**

**Date** \_\_\_\_\_