

Allendale Chamber of Commerce

2010 New Member Application

Community, Civic & Non-Profit Organizations

\$75.00

Applications are reviewed by the chamber's membership committee before membership is accepted.

(Please Print Clearly)

Organization Information

Organization Name: _____

Organization Name D/B/A: _____
(if applicable)

Organization Address: _____

Mailing Address: _____
(if applicable) _____

Business Phone: _____ **Business Fax:** _____ **Toll Free:** _____

Organization E-Mail Address: _____

Web Site Address: _____

Contact Information

Main Contact: _____

Title: _____

Phone or Ext: _____ **Cell:** _____

E-Mail Address: _____

Alt. Contact: _____

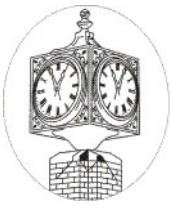
Title: _____

Phone or Ext: _____ **Cell:** _____

E-Mail Address: _____

Please make check payable to: Allendale Chamber of Commerce

Mail to:
PO Box 144
Allendale, NJ 07401



Allendale Chamber of Commerce

2010 New Member Application

Web Site Information

General Organization E-Mail Address:

Web Site:

The chamber will allow a PRIMARY Category & a SECONDARY Category (if applicable) to your primary business (i.e., State Farm **Insurance & Financial Services**). All SECONDARY Categories will be reviewed and approved by the web site committee. Please check www.allendalechamber.com to see what categories have already been set-up.

Organization Category - Main:

(i.e., Banking, Insurance, Marketing, etc.)

If possible, please e-mailed the information below to mike@middle-earthpromotions.com

Organization Slogan:

(up to 150 characters)

Organization Description:

(up to 500 characters)

Please make check payable to: Allendale Chamber of Commerce

Mail to:
PO Box 144
Allendale, NJ 07401