



FOR OFFICE USE ONLY

Date Paid : ____/____/____

Check # : _____

Membership Application for Jan. 1st, 2014 – Dec. 31st, 2014

Deadline- December 31st, 2013

Please complete this form, marking the quantity of each desired membership in the parentheses provided, and mail along with a check for the amount due to NCCOC, P.O. Box 1, Colebrook NH 03576. Please make checks payable to: North Country Chamber of Commerce. (Keep a copy for your records, if desired.)

() \$200.00 **Business Membership** 50% off for each Additional Membership thereafter.

() \$100.00 **Additional Business Membership** (Fill out back side of form with information.)

() \$50.00 **Associate Membership** - for Individuals who would like to support the Chamber's initiatives & stay connected.

Non-Profit Organization Membership - based on Annual Revenue of:

- \$10,000 & under -- () \$50.00
- \$10,000 - \$20,000 -- () \$100.00
- \$20,000 - \$30,000 -- () \$150.00
- \$30,000 & beyond -- () \$200.00

Total Due: _____

*Please provide us with your **updated** contact information below. Lines 1-3 only will be published in the Quick Reference Guide Business Directory. **Please remember, there is a maximum number of 27 characters per line.** Thank You!*

1. BUSINESS OR ORGANIZATION'S NAME: _____
2. SPECIALTY**: _____
3. BUSINESS PHONE: (____)_____ BUSINESS FAX: (____)_____
4. BUSINESS E-MAIL: _____
5. BUSINESS ADDRESS: _____
6. WEBSITE ADDRESS: _____
7. CONTACT PERSON: _____
8. CONTACT'S PHONE NUMBER: (____)_____ CONTACT'S EMAIL: _____
9. MAILING ADDRESS: _____

**Your business Specialty is a short description of what you offer. (Examples: Pittsburg Cabin Rentals, Fine Dining Restaurant, etc.)

VOLUNTEERING: Please check volunteer opportunities you may be interested in. **We can always use your help! Thank You!**

() Board Member | () Committee | () Moose Festival | () Office Support

COMMENTS: _____



ADDITIONAL BUSINESS MEMBERSHIP

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**Your business Specialty is a short description of what you offer. (Examples: Pittsburg Cabin Rentals, Fine Dining Restaurant, etc.)

COMMENTS: _____

ADDITIONAL BUSINESS MEMBERSHIP

(If you have a third business you would like a membership for, please fill out below and pay accordingly.)

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