



## 2018 Annual Membership Application

Please Print

New       Renewal

Business Name: \_\_\_\_\_

Member Name: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Phone # \_\_\_\_\_

Email \_\_\_\_\_

Type of Membership (Please check one)

- Small Business - \$100/year: Consists of 1 to 9 full time employees
- Large Business - \$250/year: Consists of 10-49 full time employees
- Banks & Corporations - \$500/year: Consists of 50+ full time employees

Make checks payable to: *Harrison Chamber of Commerce, Inc.*

**Mail to:** Harrison Chamber of Commerce, 1 Heineman Place, Harrison, NY 10528

**Or pay online at:** [harrisonchamberofcommerce.com](http://harrisonchamberofcommerce.com)

Please indicate your preference below to be included in the Harrison Chamber of Commerce official website and other marketing material

- Include business information       Do not include business information