



Rexburg Area Chamber of Commerce

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Sponsors of the Annual Idaho International Dance and Music Festival



APPLICATION FOR MEMBERSHIP (revised May 2008)

FIRM NAME: _____

MAIN CONTACT: _____ TITLE: _____

PHYSICAL ADDRESS: _____

MAILING ADDRESS: _____

WORK PHONE: _____ CELL PHONE: _____

HOME PHONE: _____ FAX NUMBER: _____

TOLL FREE PHONE: _____ DATE OPENED LOCALLY: _____

E-MAIL ADDRESS: _____

WEB ADDRESS: _____

DESCRIPTION OF BUSINESS: _____

NUMBER OF EMPLOYEES: *FULL-TIME* _____ *PART-TIME* _____

ANNUAL MEMBERSHIP DUES: \$ _____ REFERRAL MEMBER: _____

PMT TYPE & DATE: _____ RECEIVED BY INITIALS: _____

DO YOU OBJECT TO THE CHAMBER MAKING THE MAILING ADDRESS OF ALL
CHAMBER MEMBERS AVAILABLE TO BUSINESSES WHO ASK FOR THEM? YES NO

Please list all the catagories you would like your business listed under in our directory.

I WOULD BE INTERESTED IN BEING INVOLVED IN A COMMITTEE: YES _____ NO _____

SIGNATURE: _____ DATE: _____