

# LITTLE EGG HARBOR CHAMBER OF COMMERCE MEMBERSHIP APPLICATION

Today's Date:			
APPLICATION			
Contact		Business	
Last name:	First:	Name:	
Phone:	Web Site:	Fax:	E-mail:
Address: Address, PO Box, City, State & Zip Code			
Charges		<b>(ATTACH BUSINESS CARD)</b>	
<p>\$100 Membership Fee (Membership runs from January through December). New Member applications accepted after September 1<sup>st</sup> will be charged \$125, that would include the remainder of the year and the following year.</p> <p>Total \$ _____</p>			
<p>Suggestions for what the Chamber of Commerce can do for my business.</p>			
<p><small>*All Checks should be made payable to the Little Egg Harbor Chamber of Commerce.</small></p> <p><small>* The Little Egg Harbor Chamber of Commerce is a NJ Not for profit Corporation. Admission is subject to approval by the board of directors. Application fees will be refunded if your application is rejected.</small></p>			
Applicant Signature _____		Date _____	

## Credit Card Authorization Form

Credit Card Information
Card Type: <input type="checkbox"/> MasterCard <input type="checkbox"/> VISA <input type="checkbox"/> Discover <input type="checkbox"/> AMEX  <input type="checkbox"/> Other _____
Cardholder Name (as shown on card): _____
Card Number: _____ Security Code on Back of Card _____
Expiration Date (mm/yy): _____
Cardholder ZIP Code (from credit card billing address): _____

I, \_\_\_\_\_, authorize the Little Egg Harbor Chamber of Commerce to charge my credit card above for agreed upon purchases.

\_\_\_\_\_

Customer SignatureDate