



MINERAL COUNTY

CHAMBER OF COMMERCE

MONTANA

Application for Membership or Renewal

January 1, 2010 - December 31, 2010

Name: _____

Name of Business: _____

Mailing Address: _____

Physical Address: _____

Phone: _____ Fax: _____

Email _____

Web Site: _____

Number of Employees: _____ Non-Profit Organization? Yes No

Date Business Opened: _____ Days & Hours: _____

Type of Business: _____

Services Offered: _____

How would you like to receive communications? Email _____ Phone _____ U.S. Mail _____

Others associated with this Business to be added to the Chamber Contact List:

(1) Name: _____

Phone: _____ Email _____

(2) Name: _____

Phone: _____ Email _____

How do you feel the Chamber could improve commerce in Mineral County? _____

What can the Chamber do to benefit your business? _____

Would you be interested in:

serving on a Chamber committee _____

serving as a Chamber officer _____

helping with Chamber events _____

volunteering at the Chamber office _____

other _____

Annual Dues:

1 – 3 Employees \$75.00

4 – 6 Employees \$125.00

7 + Employees \$175.00

Individual (not affiliated with any business) \$15.00

Non-profit Organizations Fee Waived (Donations Accepted)

THANK YOU FOR YOUR TIME. PLEASE ENCLOSE PAYMENT WITH APPLICATION

Signature: _____ Date: _____

Mineral County Chamber of Commerce

P.O. Box 483

102 River St.

Superior, Montana 59872-0483

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www.MontanaRockies.org