

**THE MOUNTAIN GROVE
CHAMBER OF COMMERCE**

P.O. Box 434
Mountain Grove, Missouri 65711
Phone: 417-926-4135
E-mail: chamber@mountaingrovehamber.com

CHAMBER MEMBERSHIP INFORMATION APPLICATION FORM

Company Name: _____

Address: _____ P.O. Box: _____

City: _____ State: _____ Zip Code: _____

Phone: (____) _____ Fax: (____) _____

Web Page (if available): _____

Face book Page (if available): _____

E-mail Address: _____

Contact Person: _____ Job Title: _____

Type of Business: _____

Number of Employees: _____ Month/Year Business Opened: _____

Membership Investment Level

- | | |
|---|--|
| <input type="checkbox"/> 0 – 4 Employees \$130.00/annually | <input type="checkbox"/> Associate Membership \$80.00/annually |
| <input type="checkbox"/> 5 – 50 Employees \$230.00/annually | Associate membership is available to civic groups,
Citizens associations, parent/teacher associations, and
any 501(c)3 organizations <u>with no paid staff</u> . |
| <input type="checkbox"/> 51 & Up Employees \$330.00/annually | |
| <input type="checkbox"/> Financial Institutions \$330.00/annually | |

Chamber dues are tax deductible as a regular business expense.

It is my understanding that the information above is simply to provide the Mountain Grove Area Chamber of Commerce with current contact information regarding my membership and is an application form. This information is intended to help the Chamber develop a better database which to serve all area businesses in Commerce development and growth.

Authorized Signature

Date

Mountain Grove, Missouri • Take a Closer Look