



# Howell Area CHAMBER of COMMERCE

123 E. Washington Street • Howell, MI 48843 • (517) 546-3920 • Fax (517) 546-4115 • www.howell.org

*The mission of the  
Howell Area Chamber of Commerce  
is to be a catalyst for a vital business  
environment and an  
exceptional community.*

## Membership Application

Company Name \_\_\_\_\_

Representative Name \_\_\_\_\_ Title \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

E-mail \_\_\_\_\_ Website \_\_\_\_\_

No. of Employees (full) \_\_\_\_\_ (part) \_\_\_\_\_

Business Category \_\_\_\_\_ (choose from category list on reverse side)

Billing Address (if different from above) \_\_\_\_\_

## Annual Dues Investment Schedule

Reason for joining:	NUMBER OF EMPLOYEES	ANNUAL DUES
<input type="checkbox"/> networking	1-2	\$ 281
<input type="checkbox"/> community support	3-5	321
<input type="checkbox"/> advertising	6-10	383
<input type="checkbox"/> advocate for business	11-20	450
<input type="checkbox"/> information/education	21-40	540
<input type="checkbox"/> opportunities	41-60	664
<input type="checkbox"/> other	61-90	782
	91-150	911
	151-250	1007

Annual Dues \$ \_\_\_\_\_

Administration Fee

(one time) +35.00

**Total Due \$ \_\_\_\_\_**

**We accept: Visa or Mastercard**

Card # \_\_\_\_\_

Name on Card \_\_\_\_\_

Card Billing Address \_\_\_\_\_

Zip \_\_\_\_\_ Phone \_\_\_\_\_

Expiration date \_\_\_\_\_ Sec. Code \_\_\_\_\_

Signature \_\_\_\_\_

**Member Signature**

*Please make checks payable to the  
Howell Area Chamber of Commerce*

### FOR OFFICE USE ONLY

Date received \_\_\_\_\_ Entered in computer \_\_\_\_\_ Check number \_\_\_\_\_ Member Kit \_\_\_\_\_  
BankCard Response \_\_\_\_\_ Batch OK \_\_\_\_\_ MP \_\_\_\_\_

07/07