## **Malone Chamber of Commerce**

## **Membership Application**

| Address:   |  |   |      |
|--|--|---|------|
|  |  | City:   | Zip: |
| none:  | Email:   |   |      |
| /ebsite:   |  |   |      |
| ontact Person:   |  | Phone   |      |
| ey words for your business:  |  |   |      |
| ompany Slogan (if applicable   | p):  |   |      |
|  | Membership annual fee  | e:  |      |
|  | 1-10 employees<br>11-49 employees<br>50-99 employees<br>100+ employees | \$250.00<br>\$325.00<br>\$600.00                            |      |
|  | Personal membership  | \$85.00   |      |
| or any business owner that owns r  | ·  |   |      |
| •  | more than one business – take 50%                                      | % off a second business.                                    |      |
| •  | more than one business – take 50%<br>est.                              | % off a second business.                                    |      |
| Payment plans available upon requ  | more than one business – take 50%<br>est.<br><b>Ma</b>                 | % off a second business.  ail to: alone Chamber of Commerce |      |
| For any business owner that owns requestions available upon requestions. | more than one business – take 50%<br>est.<br><b>Ma</b><br>Ma           | % off a second business.                                    |      |