

# MARSING CHAMBER OF COMMERCE

## MEMBERSHIP APPLICATION \$50.00

**Membership listing (as you want your listing to appear in the Membership Directory & Buyer's Guide and other publications.)**

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

Primary Representative (Mr. / Ms. / Dr.) \_\_\_\_\_

Title \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Street Address \_\_\_\_\_

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

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone (\_\_\_\_) \_\_\_\_\_ Fax (\_\_\_\_) \_\_\_\_\_

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

Web Site Address \_\_\_\_\_

How would you most like to receive information from the Chamber? (Circle One) Email / Mail

Business Description (Days and Hours if applicable) \_\_\_\_\_

Business Category \_\_\_\_\_

Why did you decide to join the Marsing Chamber? \_\_\_\_\_

Referred by \_\_\_\_\_

As a non-profit group, our dues are tax deductible as a 501 (C) 6 organization. Our Tax ID is #**82-0473672**.

Mail: Marsing Chamber, PO Box 247, Marsing, ID 83639

Drop off: Marsing City Hall, 18 Sandbar, Marsing, ID 83639

Drop off: Technical Computer, 600 W Main St, Marsing, ID 83639