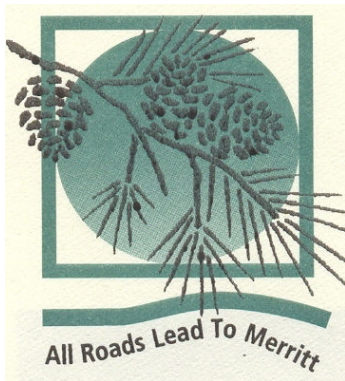


**Merritt & District
Chamber of Commerce**



*The collective voice of business
supporting responsible economic
growth and prosperity in the
Nicola Valley.*

**2185B Voght Street
PO Box 1649
Merritt, BC V1K 1B8**

**Tel: 250-378-5634
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**info@merrittchamber.com
www.merrittchamber.com**

*Thank you to our
corporate sponsors*



MEMBERSHIP APPLICATION FORM

I hereby apply for membership in the Merritt & District Chamber of Commerce. I understand and agree that this membership contract will remain in effect until I decide not to renew and give 10 days advance notice in writing, and that my annual membership is due and payable on or before the anniversary date. I understand that business memberships attach to the company named here, and not to any individual, and are not transferable. Fees are payable annually for a period of one calendar year, and are not refundable.

MEMBERSHIP ANNIVERSARY DATE: January 1, 2009

BUSINESS NAME: _____

MAILING ADDRESS: _____

STREET ADDRESS: _____

CITY: _____ **PROV:** _____ **POSTAL CODE:** _____

PHONE: _____ **FAX:** _____

E-MAIL: _____ **WEBSITE:** _____

OWNER/MANAGER: _____

VOTING REP: _____

WEB SITE LISTING: Give brief description of business (up to 100 characters), plus 3 key words as links.

CATEGORY:	FEE:	GST	TOTAL:
Businesses and Non Profit with employees	\$175.00	\$8.75	\$183.75
Individual (<i>cannot be a business owner or a vendor</i>)	\$100.00	\$5.00	\$105.00
Home Based Business with No Employees	\$100.00	\$5.00	\$105.00
Non-Profit with No Employees	\$100.00	\$5.00	\$105.00

Please keep a copy of this form for your records. A membership card and a 2008 decal will be issued to you upon payment. Remember your membership fees are tax deductible.

AMOUNT ENCLOSED: _____ **CHEQUE** _____ **CASH** _____

CREDIT CARD NO.: _____ **EXP. DATE:** _____

I would like to receive Chamber communications, newsletters and updates by (check one)

E-mail: _____ **Fax:** _____ **Mail:** _____

I would like to receive more information about the Chamber benefit package _____

OFFICE USE ONLY

New Member: yes no

Date Paid: _____
 Chq Cash Debit

Benefit Pkg Rec yes no

Web site yes no

Added/Received Membership Directory

yes no

Added /Member yes no

Decal/Member Card yes no