



Warren County Council of Chambers

P.O. Box 368, Bolton Landing, NY 12814

Phone: (518) 644-3831

Fax: (518) 644-5951

www.WarrenCountyChambers.org

APPLICATION FOR MEMBERSHIP

Date of application: _____

Please check one:

- Application for Full membership as a Chamber of Commerce
- Application for Affiliate membership as: *(Check one)*
- Individual Non-profit Group or Association
- Business Owner Government Agency or Municipality

Name: _____

Mailing Address: _____

City/Town: _____ State: _____ Zip: _____

Phone: _____ Fax: _____

Email: _____

Web site: _____

Contact Person: _____

Phone: _____ Email: _____

For Full Membership / Chambers of Commerce:

Number of paid member businesses: _____

Paid Staff? Yes No If yes, how many FT/PT? _____

Name of elected/appointed delegate to the Warren County Council of Chambers: _____

Business affiliation of delegate: _____

Contact info, if different from above: _____

Phone: _____ Email: _____

*Please include verification letter from Town Supervisor with application.

For Affiliate Membership Applicants:

Nature of business or non-profit organization (as applicable): _____

Main interest in membership: Networking Social Advocacy Educational opportunities

All applicants:

Signature: _____ Date: _____

Annual Dues Structure 2008

Chamber Memberships:	Affiliate Memberships:
15-50 members \$100	Individual \$25
51-199 members \$200	Non-profit Group / Assn \$50
200 or more members \$300	Business \$100
	Government / Municipal \$300

Dues payable to: Warren County Council of Chambers and due upon application.

"...sharing common goals to continuously promote and improve regional tourism..."