

FT. LORAMIE AREA CHAMBER OF COMMERCE

ANNUAL MEMBERSHIP DUES STATEMENT

Business Name: _____

Street Address: _____

Mailing Address: _____
(Including PO Box)

City: _____ State _____ Zip _____

Phone () _____ - _____

Fax () _____ - _____

E-mail Address: _____
(To be used for correspondence and monthly meeting minutes)

Contact Person: _____

Type of Business: _____

E-mail and local fax numbers will be the first form of Chamber communications. Mailings will only be sent to those that do not have e-mail or a local fax number. This is being done to help the Chamber save time and money from the cost of the mailings. Also make sure that the mailing address is listed (including PO Boxes) so that if there are any mailings, they make it to you in a timely manner.

Annual dues are **\$50.00**

Please mail form and check to:

Ft. Loramie Area Chamber of Commerce
P.O. Box 368
Ft. Loramie, Ohio 45845-0368

Note:

Please check box if you do **NOT** wish to be a Chamber member this year.