



Howell Chamber of Commerce Membership Application

I hereby make application for membership in the Howell Chamber of Commerce and agree to pay one year's dues in advance and a one time application fee of \$25.00.

**PLEASE USE PAPER APPLICATION ONLY IF PAYING BY CHECK
TO PAY WITH CREDIT/DEBIT CARD, APPLY ON-LINE AT WWW.HOWELLCHAMBER.COM**

Business Name: _____ Date: _____

Name of Primary Contact: _____

Business Address: _____

City: _____ State: _____ Zip: _____

Business Phone: _____ Business Fax: _____

Email Address: _____

Web Address: _____

Type of Business: _____ Referred by: _____

Briefly describe your business: _____

If you wish to get involved, let us know which committee you are interested in joining:

Would you be interested in hosting an event at your location? _____

The Howell Chamber of Commerce Member-to-Member Discount Program is one of the benefits of your Chamber Membership where Chamber businesses provide discounts to fellow members. Be sure to verify membership before giving a discount. Your discount will be included in your profile in our on-line directory.

Description of discount: _____

PAYMENT INFORMATION:

Make check payable to **Howell Chamber of Commerce**

Mail to: **Howell Chamber of Commerce, P.O. Box 196, Howell, NJ 07731** with your application.

If paying by credit card, please apply online at www.howellchamber.com.

Annual Dues (select one category):

- 1-10 Employees with ONE LOCATION: \$175.00** _____
- 11- 50 Employees with ONE LOCATION: \$240.00** _____
- 51 + Employees with ONE LOCATION: \$300.00** _____
- 1-10 Employees with MORE THAN ONE LOCATION: \$275.00** _____
- Non-Profit - submit proof of 501(C)(3): \$ 50.00** _____

Plus One Time Application Fee: \$ 25.00 _____

TOTAL ENCLOSED \$ _____