

# Arcade Area Chamber of Commerce

## Membership Application

Print this page, complete, and mail with your check to:

**Arcade Area Chamber of Commerce**  
**684 West Main Street, Arcade, NY 14009**

(Make sure checks are made out to "Arcade Area Chamber of Commerce")

<b>Annual Dues</b>	<b>Number of Employees</b>	<b>Amount</b>
	1-10 employees	\$80.00
	11-25 employees	\$90.00
	26-49 employees	\$100.00
	50+ employees	\$130.00
	0- Gratis (New Business)	1 year free
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Associate Members	Under 65	\$55.00
	65 and Over	\$35.00

Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Business/ Organization Name: \_\_\_\_\_

Number of Employees: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Fax Number: \_\_\_\_\_

Business Address: \_\_\_\_\_

City/ Town: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Type of Business: \_\_\_\_\_

Website: www. \_\_\_\_\_

Email: \_\_\_\_\_ @ \_\_\_\_\_