

MEMBERSHIP APPLICATION

**PIKE COUNTY CHAMBER OF COMMERCE**

NAME \_\_\_\_\_

BUSINESS \_\_\_\_\_

ADDRESS \_\_\_\_\_

OWNER or MANAGER \_\_\_\_\_ PHONE \_\_\_\_\_

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**TYPE OF BUSINESS: (check one)**

- Agriculture     Amusement & Entertainment     Construction Firm or Contractor
- Financial Institution     Housing Firm     Insurance or Real Estate
- Manufacturing or Processor, including lumber
- Newspaper, Printer     Professional Firm or Individual     Broadcasting, Radio or Television
- Retail Outlet     Restaurant, Café, Tavern     Transportation
- Service (Barber, Beauty Parlor, Cleaner, Laundry, Auto, Etc.)     Wholesaler, Distributor, Dealer
- Utility     Professional (Teacher, School Administrator, Elected Official, Clergy)
- Other (Not classified above)     Retiree

**NUMBER OF EMPLOYEES: (check the most appropriate)**

**For membership fee amount, call the chamber at 740-947-7715**

- 1-2     1-3     1-6     3-6     4-8     7-15     16-25     11-50     51-100     None
- 3 and more     4 and more     6 and more     7 and more     26 and more     101 and more

*CHAMBER OF COMMERCE DUES ARE DEDUCTIBLE FROM INCOME TAX AS A BUSINESS EXPENSE.*

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I hereby apply for membership in the Pike County Chamber of Commerce and agree to give active support to its programs.

Signed \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_

The above named applicant is known to me as one of good character and reputation interested in the welfare and progress of this community and Pike County. I therefore recommend acceptance of this application.

- Check for \$ \_\_\_\_\_ attached     Send statement for dues.

Signed \_\_\_\_\_ PCCC Member    Date \_\_\_\_\_