



**RED LODGE AREA
CHAMBER OF COMMERCE
Membership Form**

Firm Name: _____

Contact Name: _____

Mailing Address: _____

P.O. Box

City

State

Zip

Email: _____ Website: _____

Main Business Phone Number (____)____-____ Fax: (____)____-____

Toll Free (____)____-____ Cell: (____)____-____

Physical Address: _____

City

State

Zip

Business Classification: _____ Dues: \$ _____
(Refer to the 2012-2013 Membership Investment Options)

New Member Discount If Applicable/10% Total Dues: Discount: \$ _____

Visitor Center Contributions: \$ _____

Total Annual Investment: \$ _____

I would be interested in participating in _ Special Events or _ Committee Assignments

Owner's Signature

Date

Owner's Printed Name

