



**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: _____
(Refer to the 2011 Membership Investment Options)

Dues: \$ _____

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