

Wamego Chamber of Commerce/Mainstreet
529 Lincoln Avenue
Wamego, KS 66547
wchamber@wamego.net



2010
Membership
Application

Business Name:

Mailing Address:

Physical Address (if different from mailing address):

Business Phone: Fax:

Website:

Primary Contact Person:

Primary Contact Person E-mail:

Primary Person Office Phone:

Secondary Contact Person:

Secondary Contact Person E-mail:

Secondary Contact Person Phone:

How do you prefer to be contacted?

Phone E-mail

How do you prefer invoices to be delivered?

US Mail E-Mail

Date submitted:

I am interested in serving on the following committee(s):

- | | |
|---|--------------------------------------|
| <input type="radio"/> Annual Meeting | <input type="radio"/> Community Life |
| <input type="radio"/> Golf Tournament | <input type="radio"/> Christmas |
| <input type="radio"/> Independence Day Parade | <input type="radio"/> Design |
| <input type="radio"/> Tulip Festival | <input type="radio"/> Promotions |
| <input type="radio"/> Economic Restructuring | <input type="radio"/> Organization |

I would like to join the Wamego Chamber of Commerce/Mainstreet at the following level:

- | | |
|--|------------|
| <input type="checkbox"/> Civic / Non-Profit Member | \$85.00 |
| <input type="checkbox"/> Bronze Member | \$200.00 |
| <input type="checkbox"/> Silver Member | \$350.00 |
| <input type="checkbox"/> Gold Member | \$500.00 |
| <input type="checkbox"/> Diamond Member | \$1,000.00 |

My business is interested in hosting an After Hours reception. Preferred month: _____

I have included my payment for Chamber membership dues.

I would like to be invoiced for my Chamber membership dues.

I would like to set up a payment plan for my Chamber membership dues.

Please return completed form to:

Wamego Chamber of Commerce/Mainstreet
529 Lincoln Avenue
Wamego, KS 66547
wchamber@wamego.net
Fax: 785-456-7427