

**HURON COUNTY CHAMBER OF COMMERCE
MEMBERSHIP APPLICATION**

The Huron County Chamber of Commerce is an association of business and professional people dedicated to serving the needs of area business and industry, fostering economic growth and development, and enhancing the quality of life in Huron County and the surrounding areas.

Your membership in the Chamber of Commerce is an investment in the present and future welfare of Huron County area businesses and the entire community. We welcome your support and involvement. Please complete all sections of this application, and then return with your payment to:

Huron County Chamber of Commerce
10 West Main Street - Norwalk, OH 44857
PH: 419-668-4155 FAX: 419-663-6173
Chamber@HuronCountyOhio.com www.HuronCountyChamber.com

Date: _____

Name of Business/Organization: _____

Business Address/Location: _____

City: _____ State: _____ Zip: _____ Telephone: _____

Mailing Address (if different): _____

Contact Person: _____ Title: _____

Other Representatives: _____

Fax: _____ Do you wish to have fax number published in the Directory? No Yes

E-mail _____ Do you wish to have e-mail published in the Directory? No Yes
(REQUIRED INFORMATION FOR RECEIPT OF NEWSLETTER)

Web address _____ Do you wish to have Web site published in the Directory? No Yes

****Additional Locations****

You may have additional locations of your business (that all do the same type of business) listed in the chamber directory for an additional cost of \$25 each. The listing will include the business name, address, phone, one email OR web site, and one contact name.

The businesses must do the same thing to qualify as a second listing and not as a separate entity, e.g. banks might list additional branches. However, if the first business is a manufacturer and the 2nd business is a retail location those will still be considered separate entities and require separate memberships.

Business name: _____

Address: _____ Phone: _____

Email OR web site: _____ Contact name: _____

(please send other listings on separate page)

I was referred to become a member by:

Name Company

I understand that membership in the Huron County Chamber of Commerce constitutes my express permission for the Chamber to transmit by telephone, facsimile machine, e-mail or written materials to the number(s) I've provided above, including but not limited to those relating to property, goods, services, events, newsletter, meetings or notices, and the availability thereof. I also understand that these may be published in our membership directories.

Signed: _____ Title: _____ Date: _____

(Please complete 2nd page also)

WEB SITE LISTING

Each business is invited to submit us a BRIEF description of what you do, services, products, hours, etc. In an effort to attract more/new customers to your business we are offering this opportunity to every member at no cost.

There are a few guidelines we will require to be followed:

- Your Company Name, Address and Phone number will already be listed on the website. Use the additional 25 words to describe your services, products, hours, etc.
- Max length of 25 words. The Chamber office will edit submissions that exceed the 25 word limit.
- Promote your business as it is registered with the chamber. This means, if your chamber membership is as a widget retailer, but you also just happen to have construction, insurance, salon, and restaurant businesses on the side, you can't promote those additional businesses, only the business that is the member of the chamber. Now, of course, we'd be more than happy to welcome your other businesses as full members of the chamber and help you promote them as well!
- Don't promote a sale or special offer, this is a permanent posting. Use key words, phrases that people looking for your business need to know.
- Please do not claim to be the best or refer to your competition in any way. You may use certifications, such as ASE Certified Mechanics, Licensed Massage Therapy, etc., that indicate a level of industry recognized expertise.
- We reserve the right to edit or request an alternative submission.

BUSINESS REFERRAL SERVICE

Tell us what your business sells, services provided, or product manufactured:
(If possible, please supply informational brochure about your company / business.)

Will you accept Chamber Gift Certificates? _____

Would you like to provide coupons or special discount information to put in New Resident Packets?

No ___ Yes ___ If yes, please provide the office with 50 items every other month.

Membership Investment:

<u>Business Size</u> (total employees working at all locations listed)	<u>Investment Amount</u>
Additional location listing	\$25 each
1 – 25 employee's	\$280 year
26 – 50	\$375
51 – 100	\$475
101 – 150	\$575
151 – 200	\$640
201 – 300	\$715
301 – 400	\$830
401 – 500	\$1000
501 – 600 +	\$1210
Utilities	\$530
Individual	\$180
Non-profits	\$180
Financial Institutions	\$520 plus Business Size Investment Amount