



HOLLISTER
Area Chamber of Commerce

Post Office Box 674
Hollister, Missouri 65673.0674

New Membership Application

Name of Business _____

Main Company Representative _____ Title _____
(Person to be listed in Chamber records for billing and communication.)

Mailing Address _____

City _____ State _____ Zip _____

Street Address (if different from mailing address) _____

City _____ State _____ Zip _____

Company Phone _____ Company Fax _____

Company E-Mail _____ Company Web Address _____

Business Type (As listed on membership Investment Schedule) _____

Number of Employees: _____ Enrollment Date: _____

Please list additional employees if you choose.

These representatives will receive communications and other opportunities from the Chamber.

Name _____ Title _____ E-Mail Address _____

Name _____ Title _____ E-Mail Address _____

Name _____ Title _____ E-Mail Address _____

Name _____ Title _____ E-Mail Address _____

Membership Investment

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The Investment Structure is set by the Hollister Area Chamber of Commerce Board of Directors.
Investments may be paid in advance or annually.

Your partnership automatically renews itself each year in your anniversary month.
Any member resigning from the Chamber must submit their resignation in written form to the Board.

Membership Investments paid to the Hollister Area Chamber of Commerce are not tax deductible as a charitable contribution.
However, membership investments may be tax deductible as an ordinary business expense.

All applications are subject to approval by the Chamber's Board of Directors.