



2008-2009 Membership Application

Date: _____ Business Category: _____

Name of Business: _____

Name(s) of Representatives: _____

Title: _____

Address: _____

City/State/Zip: _____

Phone: _____ Fax: _____

E-mail: _____ Website: _____

By providing a fax number and e-mail address, I/we agree to receive fax and e-mail communications from the Olney Chamber of Commerce.

Referred by: _____

Brief description of business (25 words or less): _____

You can increase your business's exposure by volunteering to serve on a Chamber committee.

- Please check those in which you are interested: Finance Membership Programs
 Community Relations/Scholarship Communications Crime Prevention
 Community Night National Night Out Business Development Legislative Affairs

Membership in the Olney Chamber of Commerce runs from July 1 through June 30.

Annual dues are payable in advance on July 1.

- \$200 per year for 1-24 employees \$290 per year for 25+ employees

Enclosed is payment in the amount of \$_____ paid by

- Check payable to the Olney Chamber of Commerce
 VISA MasterCard American Express

Card No.: _____ Exp. Date: _____

Signature: _____

Mail completed application, including payment, to:
Olney Chamber of Commerce ■ P.O. Box 550 ■ Olney, MD 20830