



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.

- \$250 per year for 1-24 employees** **\$350 per year for 25+ employees**
 Associate membership, \$100 per year for those whose parent company is already an OCC member
 Student/Retiree membership, \$50 per year to allow high school and college students and retirees to connect with the local business community by attending activities and networking opportunities.

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

or become a member online: www.olneymd.org