

Webster Area Chamber of Commerce

MEMBER APPLICATION FORM

Fill out form and send along with \$60 membership fee to:

Webster Area Chamber of Commerce

P.O. Box 48

Webster, WI 54893

www.websterwisconsin.com

Date: _____

Business/Organization Name: _____

Address: _____

E-mail: _____ website: _____

Business Phone: _____

Business Owner(s)/Representative: _____

Owner(s)/Representative Phone: _____

How long have you been in business: _____

Do you have interest in being on the Board of Directors? _____

Contact me for help during (please check at least one): Santa Day Craft Fair
 4th of July Parade Gandy Dancer Days Chamber Member Spring Dinner Meat Raffles

Additional Comments: _____

Enclosed is my \$60 membership fee (check or money order only)

made out to: Webster Area Chamber of Commerce

(Send to address above)

Signature of applicant: _____

The Board of Directors meets on the third Monday of each month and welcomes all members to attend.