



IDYLLWILD CHAMBER OF COMMERCE

APPLICATION FOR MEMBERSHIP

Business Name:				Date:																																				
Contact Person:				Email:																																				
Street Address:			City:	Zip:																																				
Mailing Address:	City:	Zip:	Website Address:																																					
Phone:	FAX:	CELL:																																						
Description of your business: (Max 25 Words)																																								
<p>What category should your business be listed on for the Chamber of Commerce website: (Please check one only)</p> <table border="0"> <tr> <td>Auto</td> <td>Galleries/Art</td> <td>Newspaper</td> <td>Restaurants</td> <td>Theatres</td> </tr> <tr> <td>Artists</td> <td>Photography</td> <td>Non-Profit</td> <td>Retail</td> <td>Travel</td> </tr> <tr> <td>Camps</td> <td>Hardware</td> <td>Online Bus'</td> <td>Retreats</td> <td>Tree/Gardener</td> </tr> <tr> <td>Churches</td> <td>Interior Design</td> <td>Pets/Supplies</td> <td>School</td> <td>USPS</td> </tr> <tr> <td>Construction</td> <td>Lodging</td> <td>Pharmacy</td> <td>Service Clubs</td> <td>Utilities</td> </tr> <tr> <td>Financial</td> <td>Medical</td> <td>Publisher</td> <td>Storage</td> <td>Others (Specify)</td> </tr> <tr> <td>Food Stores</td> <td>Mortuary</td> <td>Real Estate</td> <td>Tailors</td> <td></td> </tr> </table>						Auto	Galleries/Art	Newspaper	Restaurants	Theatres	Artists	Photography	Non-Profit	Retail	Travel	Camps	Hardware	Online Bus'	Retreats	Tree/Gardener	Churches	Interior Design	Pets/Supplies	School	USPS	Construction	Lodging	Pharmacy	Service Clubs	Utilities	Financial	Medical	Publisher	Storage	Others (Specify)	Food Stores	Mortuary	Real Estate	Tailors	
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<p>Note: The above information will be used by the Idyllwild Chamber of Commerce on its website as a member benefit. Please print clearly if hand filled and enter the Information exactly as you want it to appear. Check this box if you do not wish your email address or phone number to be distributed to other members or displayed on website.</p>																																								
Special Request:		For Chamber Office Use Only																																						
		Date Received		AMT Paid																																				
		Check #	MO #	VISA/MC	Cash																																			
		New Member		Renewal																																				
		Web Linked (Y/N)		Date																																				
		Roster	Email	Category																																				
		Package	Date	By																																				

Business	\$140.00
Associate	\$75.00
Individual	\$40.00

Save, Print, and Mail with payment to: Idyllwild Chamber of Commerce

PO Box 304, Idyllwild, CA 92549

Type, Save, and Email to: Info@IdyllwildChamber.com (You will be contacted by Membership for payment)

Local: 951-659-3259 Toll Free: 888-659-3259 FAX: 951-659-6216