

MEMBERSHIP APPLICATION

Hurricane Valley Chamber of Commerce

P.O. Box 101, Hurricane, Utah 84737
phone: (435) 635-3402 fax: (435) 635-5733

Firm Name: _____ Date: _____

Address: _____

City: _____ State: _____ Phone: _____ Fax: _____

Email Address: _____ Website: _____

Chief Executive Officer: _____ Birth Date: _____

Spouse's Name: _____

Dues	1 - 5 employees	\$100.00		
	6 - 25 employees	\$150.00	Associates	\$50.00
	26 - 100 employees	\$200.00	Affiliates	\$75.00
	101 - 200 employees	\$250.00	Also, for new members a one-time	
	201 - 500 employees	\$300.00	set-up fee of \$40.00 will be charged	
	Over 500 employees	\$400.00	for new member benefits	

Authorized Signature: _____

Title: _____

Please complete the following:

No. of Employees: _____ Date Business Was Founded: _____

Date Established in the Hurricane Valley: _____

YES, I am interested in the Ambassador Club

Business Classification: _____

Please list company/business representatives below:

Representative's Name: _____ Title: _____

Representative's Name: _____ Title: _____

Representative's Name: _____ Title: _____

Special Instructions: _____

Sponsor: _____

Firm: _____

Twenty-Five Word Write Up About Your Business: _____
