

St. Margaret's Bay Chamber of Commerce



ST. MARGARET'S BAY
CHAMBER OF COMMERCE
PEOPLE PRIDE PROSPERITY

2010 MEMBERSHIP APPLICATION

(Apr 1, 2010 to Mar 31, 2011)

Application Type New Member Renewal Member ID: _____ (if applicable)

Business Name: _____ **Bus Tel No:** _____

Civic Address	<i>(for use by civically listed businesses)</i>	
Address:		
City/Town:		
Postal Code:		<input type="checkbox"/> same as mailing address
Email:		
Web Site:		
(this information will be used for public listing in directory)		

Mailing Instructions	Civic Addr <input type="checkbox"/>	Primary <input type="checkbox"/>
	Mailing Addr <input type="checkbox"/>	Alternate <input type="checkbox"/>

All Chamber mail is to be sent to the indicated address above.:

Mailing Address	<i>(if different than civic address)</i>	
Address:		
City/Town:		
Postal Code:		

Contact Info

Primary	<input type="checkbox"/> show contact name in public listing
Name:	
Work Tel No:	Cell No:
Home Tel No:	Fax No:
Email:	
Address:	
City/Town:	
Postal Code:	

Alternate	
Name:	
Work Tel No:	Cell No:
Home Tel No:	
Email:	
Address:	
City/Town:	
Postal Code:	

Business Description Give a 50 word or less description to be placed on Chamber web site - use back of application if necessary.

No. of Employees

Category - Select one category that best describes your business (for web site listing) - one additional category may be selected.

- | | | | |
|----------------------|------------------------|---------------------------|------------------------------|
| Accommodations | Food Stores | Manufacturers | Restaurants |
| Automotive | Health & Medical | Marine | Retail Shop / General Store |
| Computers & Internet | Home & Garden | Professional / Consulting | Services |
| Construction | Investment / Financial | Real Estate | Community / Interested Party |

Fees - Select

Companies	\$ 75.00	Add'l Company Listings	\$ 25.00 (attach 2nd application)
Retirees / Indiv / Int Parties	\$ 25.00		
Non-Profit Organizations	\$ 25.00		

Method of Payment Cheq Cash

Please mail Application & Payment to: 3650 Hammonds Plains Rd, Unit 14, Suite 356, Upper Tantallon, NS, B3Z 4R3 or drop off at Bay Professional Centre, 5832 St. Margaret's Bay Rd, Head of St. Margaret's Bay

I submit our application for full Chamber membership with all rights, privileges, and benefits. I understand the information I provide may be published or given out as part of the Chamber's services to its members and public. I understand and agree to be governed by the present and future by-laws of the organization.

Signature: _____ Date: _____