



Membership Application

Please return application and payment to:

2007 Civic Center Way, Round Lake Beach, IL 60073 or Fax 847-546-2254

Phone: 847-546-2002 Email: info@rlchamber.org

Business Name _____

Business Address _____ City & Zip _____

Primary Contact _____

Mailing Address (If different from physical address) _____ City & Zip _____

Primary Phone _____ Fax _____ Cell _____

Email Address _____

Please **PRINT** additional staff that should receive information:

Name:

Email address:

Phone:

_____	_____	_____
_____	_____	_____
_____	_____	_____

What category of services should your business be listed as? _____

Would you like us to link access to your website through www.rlchamber.org? _____ Yes _____ No

If yes, please list website: _____

Year business was established? _____

Circle below, Chamber functions you are interested in being involved with:

-Expos -Nomination Committee -Scholarships -Map/Community Directory -Installation Dinner -Santa
Supper -Village Festivals -Workshops/Speakers -Mixers -Other _____

Are you interested in offering a discount to Chamber members? Yes _____ No _____

-Please note: Discount offered will be available to all Chamber members and Chamber member employees.

Please describe discount:

Were you referred by a Chamber Member? If yes, name of Chamber Member: _____

Annual Membership Fee: \$200.00 - (\$175 for 501(c)3 organizations with paperwork) **-12 Month Membership**

Fax this Application to: (847) 546-2254 Please note: Membership is pro-rated at \$16.25 per month.

Payment amount enclosed: \$ _____ Cash -or- _____ Check

Card # _____ Expiration Date: _____ Card Type: _____

3-digit security code on back of the card: _____ Billing Zip Code: _____

Name on credit card: _____ Signature: _____

Chamber Office Use

Date Received: _____ Amount: _____ PMNT Type: _____ Added CM & CC: _____

Notes: