



Easton Chamber of Commerce Membership Application

Business Name _____

Business Address _____

Business Telephone _____

Business Fax _____

Business Email _____

Contact Name (please sign below) _____

Business Description (for use on our website) _____

Purpose for Joining the Chamber _____

Exclusive Member to Member Discount Program – offers discounts to fellow members. Would your business be interested in participating?

Yes/No Discount offered _____

Would you like a *free* link to your business website from our website?

Yes/No Name of website _____

The 2010 Membership Fee is \$220 (please note that dues are billed on a calendar basis) and is payable to: Easton Chamber of Commerce, 134 Main Street, North Easton, MA 02356. The Easton Chamber of Commerce is dedicated to servicing its members. For further inquiries please call (508) 238-2225 or visit our website for up-to-date information at www.easton-chamber.com.

Signature of applicant: _____ **Date:** _____