



Supporting our Business Community.

Easton Chamber of Commerce Membership Application

Business Name _____

Business Address _____

Business Telephone _____

Business Fax _____

Business Email _____

Business Website _____

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 _____

The 2012 annual Membership Fee is \$220 and is payable to:

Easton Chamber of Commerce

134 Main Street,

North Easton, MA 02356

Please note that renewals will be billed on a calendar-year basis.

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:** _____