

Greater North Collins Chamber of Commerce

PO Box 184 North Collins, NY 14111 jim@gnccc.org

716-337-3160

MEMBERSHIP APPLICATION

Name & Title:					
Business Name:					
Business Address:					
Mailing Address (if different):					
City / State / Zip:					
Business Phone:					
Cell Phone:					
Email Address:					
Business Web Address:					
Social Media Used: Facebook Ins	stagram	_Twitter	_ LinkedIn	Other	None _
Preferred Method of Contact:					
Please describe the main products o	r services y	ou or your o	company pro	vide:	
Membership Information			New	Renew	·al
Business Mem	nbership	(\$50) Ind	_		
Please make your check paya		_ 、 ,		•	_
Signature			Date		