## Avinger Area Chamber of Commerce **Application for New or Renewal Membership**

Business name (if business or non-profit membership):
Individual name (if individual membership):
Your name:
Mailing address:
Phone:
Email:
Website URL (if applicable):
Requested Membership Level: (check)
Business Membership: \$100 Individual or Non-Profit Membership: \$25.
Is this a first-time membership request for you or your business?  Yes  No

Return application and payment to:

Avinger Chamber of Commerce, P.O. Box 7, Avinger, TX 75630.