NASHWAUK AREA CHAMBER OF COMMERCE

FROM TIMBER TO TACONITE

**P.O. BOX 156-NASHWAUK, MINNESOTA 55769**

2025 MEMBERSHIP APPLICATION

(MEMBERSHIP AND RENEWALS DUE BY March 20,2025)

NEW: \_\_\_\_\_\_\_\_\_\_ RENEWAL: \_\_\_\_\_\_\_\_\_\_

DATE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

BUSINESS/ORGANIZATION NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

ADDRESS: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

CITY: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ STATE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ZIP CODE: \_\_\_\_\_\_\_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

EMAIL: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

CONTACT PERSON: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

TYPE OF BUSINESS OR ORGANIZATION: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

NAME VOTING REPERSENTIVE FOR YOUR BUSINESS/ORGANIZATION: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**MEMBERSHIP OPTIONS:**

**PLEASE SELECT YOUR APPROPRITE MEMBERSHIP TYPE (IF YOU ARE UNSURE OF YOUR MEMBERSHIP TYPE, PLEASE CONTACT US)**

MEMBERSHIP TYPE COST AMOUNT PAID

( ) INDIVIDUAL $25 $\_\_\_\_\_\_\_\_\_\_\_\_\_

( ) SOLE PROPRIETOR(NON-BUSINESS) $40 $\_\_\_\_\_\_\_\_\_\_\_\_\_

( ) BUSINESS $60 $\_\_\_\_\_\_\_\_\_\_\_\_\_

( ) NON-PROFIT GROUP $35 $\_\_\_\_\_\_\_\_\_\_\_\_\_

( ) GOVERNMENT $60 $\_\_\_\_\_\_\_\_\_\_\_\_\_

**PAYMENTS MUST ACCOMPANY APPLICATION, CHECKS CAN BE WRITTEN OUT TO NACC AND SENT TO THE ADDRESS LISTED AT THE TOP OF THIS FORM.**

ANY QUESTIONS PLEASE CONTACT US AT: NASHWAUKCHAMBER@GMAIL.COM

THE INFORMATION ON THIS FORM WILL BE USED TO UPDATE OUR CONTACT LIST AND WEBSITE.

OFFICE USE ONLY DATE RECEIVED: \_\_\_\_\_\_\_\_\_\_\_\_\_ PAYMENT AMOUNT: \_\_\_\_\_\_\_\_\_\_\_\_

CHECK NUMBER: \_\_\_\_\_\_\_\_\_\_