



2024 Annual Membership Application

Please Print:

Business Name: _____

Address: _____

City, State, Zip: _____

Contact Person: _____ Phone # _____

Email: _____ Website: _____

Instagram _____ FaceBook _____

Type of Membership (check one)

- Small Business \$100/year: Consists of 1 to 9 employees
- Large Business \$250/year: Consists of 10-49 employees
- Banks & Corporations \$500/year: Consists of 50+ employees

Payment Options:

Zelle- info@harrisonchambeofcommerce.com OR

Check payable to: Harrison Chamber of Commerce

Mail to: 280 Harrison Ave, Harrison, NY 10528 OR

On our website: Harrisonchamberofcommerce.com

THERE IS A 3% CHARGE ON ALL CREDIT CARD PAYMENTS.

Please Email your business logo to: info@harrisonchambeofcommerce.com

which will be included on all Chamber advertising and on our website.

Please note Membership Dues are applicable per calendar year.

Members paying online must email us this completed form. Thank You!