



2019 Annual Membership Application

Please Print

New Renewal

Business Name: _____

Member Name: _____

Address: _____

City/State/Zip: _____

Phone # _____

Email _____

Type of Membership (Please check one)

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

Make checks payable to: *Harrison Chamber of Commerce, Inc.*

Mail to: Harrison Chamber of Commerce, 1 Heineman Place, Harrison, NY 10528

Or pay online at: harrisonchamberofcommerce.com

Please indicate your preference below to be included in the Harrison Chamber of Commerce official website and other marketing material

- Include business information Do not include business information