

Company Name:	Owner/CEO:		
Mailing Address:	City:	State:	Zip:
Phone Number:	Cell Number:		
Email:			
Website:			
Number of Employees: {Full Time) _	(Part Time)	(Seasonal)	
Type of Business and Services Provided:			
Contact Person / Representative for Chan	nber Communications:		
Email Address for Representative:			
Annual Investment Amount:	Date Join	ed:	
What is your primary expectation from the	e Chamber?		
Authorized Signature:		Title:	

2024 - 2025 Investment Legend

The Washington Chamber of Commerce invites you to become a community investor to help support the community and local commerce.

Membership Level:	Number of Employees:	Investment:
Level 1	1-3	\$85.00
Level 2	4-10	\$115.00
Level 3	11-25	\$140.00
Level 4	26-50	\$200.00
Level 5	51-100	\$310.00
Level 6	101-200	\$470.00
Level 7	Over200	\$660.00
Government	Not Applicable	\$120.00
Club/ Church	Not Applicable	\$60.00
Individual	No Business Affiliation	\$40.00