



**ANNUAL
MEMBERSHIP**

Westside Christian Chamber of Commerce MEMBERSHIP APPLICATION		
APPLICANT INFORMATION		
Company Name:	Membership type	Diamond Platinum Gold Silver Bronze Non-profit Individual
Contact Person:	Title / Position	
Physical Address:	Email:	
City:	State:	ZIP Code:
Mailing address:		
City:	State:	ZIP Code:
Phone:	Cell	Website:
Type of Business:		
SIGNATURE		
<p>I AGREE to allow Westside Christian Chamber of Commerce to email, call or mail me any correspondence.</p> <p>I agree that I am a Christian; and I will welcome non-Christians providing all members and guests conduct my/their business with honesty, integrity, and work within the guidelines of the Westside Christian Chamber of Commerce.</p>		
Signature:	Date:	

Scan or send .jpg

kirk@westsidechristianchamber.com

For more information, visit www.westsidechristianchamber.com

Or, contact: kirk@westsidechristianchamber.com