



Paoli Chamber of Commerce
2021 Membership Form

Business Size. Please select a category:

_____	Individual, Non-Profit, or Church	\$25.00
_____	1-10 Employees	\$60.00
_____	11-30 Employees	\$110.00
_____	31-70 Employees	\$160.00
_____	71-99 Employees	\$210.00
_____	100-150 Employees	\$260.00
_____	151+ Employees	\$310.00

Business Name: _____

Business Address: _____

Mailing Address: _____
(If Different than _____
Above) _____

Customer-Facing Contact Information:

Business Phone: _____

Business Website: _____

Business Email: _____

Business Fax: _____

Contact for Chamber of Commerce:

Contact Name: _____

Contact Phone: _____

Contact Email: _____

- continued to page 2 -



Paoli Chamber of Commerce
2021 Membership Form

What would you like to see the Chamber achieve?

What activities would you like to be involved in? (Including Paoli Fall Festival)

Would you be willing to host a Chamber after-hours or luncheon event?

Yes No

Please mail your completed form and payment to:

Paoli Chamber of Commerce
PO Box 22
Paoli, IN 47454

–OFFICE USE ONLY–

Form Received On: _____

Payment Received On: _____