



Membership Application

ANNUAL DUES INVESTMENT SCHEDULE

Employees	Annual Dues
Individual	\$30
2 - 5	\$55
6 - 10	\$80
11+	\$110

COMPANY INFORMATION

My company would like to become a member of the Waurika Chamber of Commerce. List our company as follows:

Company Name _____

Mailing Address _____ Physical Address (if different) _____

Street _____ Street _____

City/State/Zip _____ City/State/Zip _____

Phone 1 _____ Phone 2 _____ Fax _____

Company Email _____ Company Website _____

Number of Local Employees: Full-Time _____ Part-Time _____

Facebook _____ Instagram _____

Twitter _____ YouTube _____

Please list 3 categories you would like to use for your listing and referral service.

(1) _____ (2) _____ (3) _____

REPRESENTATIVE INFORMATION

Primary Company Contact

Name _____

Title _____

Phone _____

Email _____

Additional Representative

Name _____

Title _____

Phone _____

Email _____

Applicant Signature _____ **Date** _____