

**BUSINESS INFORMATION**

Business Name   
*(AS IT SHOULD APPEAR IN LISTING)*

Mailing Address:

Physical Address:

Principal / Owner:

Primary Contact:

Phone (Directory Listing):  Phone (Primary Contact):

Cell Phone:  Fax:

Website:  Email:

Does Your Business Have a Social Media Page? (Circle All That Apply)    Facebook    Instagram    LinkedIn

Business Category

Business Description

Member-to-Member Discount Offer (if any)

Interested in Learning About Healthcare Coverage Options? (circle)    YES    NO

**DUES & PAYMENT**

Annual Dues     To determine your membership dues, please see rates below:

**Business Membership Dues - Annual Rates**

<u>Number of Employees*:</u>	<u>Dues:</u>
3 or Fewer .....	\$245
4 - 10 .....	\$325
11 - 15 .....	\$410
16 - 20 .....	\$490
21 - 30 .....	\$620
31 - 50 .....	\$815
50 or More .....	\$1210
Non-Profits .....	1/2 Business Rate

Please mail this form  
and payment to:

Greene County Chamber  
of Commerce  
P.O. Box 248  
Catskill, NY 12414

Credit Card #  Exp. Date  CVN   
(3 digit code)

Signature  Date  Zipcode