

Basin Area Chamber

Check one:

Renewing Member _____ New Member _____

Date: _____

Business Name: _____

Contact Person: _____

Street Address: _____

Mailing Address: _____

Phone Number(s): _____

E-mail address(es): _____

Web site: _____

Membership Category

Business: (Home, retail, ag, farm, construction, etc)

(Owners are considered employees for counts below)

1 Employee \$ 40

2-4 Employees \$ 65

5-10 Employees \$130

Over 10 Employees \$180

Special Categories:

Churches/Non Profits \$ 40

Individuals/Families \$30

Service Listing

Please list all the categories you would like to be listed under:

Suggestions: (fundraising, beautification, programs, etc)

Amount Due: \$ _____

Additional Donation for Christmas lights. \$ _____

Signed: _____

**Return to: Basin Area Chamber of Commerce
PO Box 883, Basin, WY 82410**