

Falls Chamber of Commerce P.O. Box 178 St. Croix Falls, WI 54024 715.483.3580 director@fallschamber.org FallsChamber.org

## **2018 MEMBERSHIP APPLICATION**

## **General Information for Website Directory and Referrals**

 $\square$  I am interested in making recurring, monthly payments.

Business Name		
Street Address		
Mailing Address		
General Phone Web	site	
General Info Email	Facebook Page? ☐ YES ☐ NO	
Information for the Falls Chamber		
Primary Contact Person/Title		
Contact Phone and Email		
<b>Membership Investment</b> Please check the appropriate investment level based on your Only include those part-time employees who work more than	· · · · · · · · · · · · · · · · · · ·	
□ \$200 Base Membership – Includes owners and three employees  If you have more than three employees, add:  \$20 per FT employee: #x \$20 = \$10 per PT emp. (>980 hrs/yr): #x \$10 =  Total membership investment = \$ (\$1200 maximum)	☐ \$50 Social Member – Individual, non-business (does not include any marketing)	
	☐ \$75 Church/Community Service Organization (0-1 paid staff)	
	☐ \$150 Church/Community Service Organization (2+ paid staff)	
	☐ \$150 Government	
Multiple Small Business Discount – Owners/Ownership Gro largest business. Any other small business with fewer than t \$100 each. Please contact the Falls Chamber for additional i	hree FTE (plus owners) are eligible to join for	

## **HELP US PROMOTE YOU AND YOUR BUSINESS!**

To help us promote your business on the Falls Chamber website and Facebook, please complete the following. You may also email your response with logos and/or photos to: director@fallschamber.org.

Short Description	
Extended Description (if desired)	