

Napanee & District Chamber of Commerce Application for Membership

Mission: To strengthen the business community.

Vision: To be the "Voice of Business" and a strategic partner in economic development.

Business Name/Type: _____

Address: _____

Town: _____ Postal Code: _____ Telephone: _____

Website: _____ E-mail: _____

Facebook Page? Twitter Feed? Contact Name/Position: _____

Sector: _____ # of Employees (Include Owner/s): _____ Established (Month/Year): _____

- Category A @ \$178.00/year + \$23.14HST = \$201.14 (1 to 10 FT/FTE employees/owner)
- Category B @ \$240.00/year + \$31.20HST = \$271.20 (11 to 20 FT/FTE employees/owner)
- Category C @ \$367.00/year + \$47.71HST = \$414.71 (21 to 100 FT/FTE employees/owner)
- Category D @ \$658.00/year + \$85.54HST = \$743.54 (+100 FT/FTE employees/owner)
- Category E @ \$76.00/year + \$ 9.88HST = \$85.88 (Non-business Individuals)
- Category F @ \$97.00/year + \$12.61HST = \$109.61 (Not-for-Profit Organization)
- Category G **New Business? Receive a 50% discount in first year!** (Start Up Business)

- Please check the applicable category for your company and forward your application/fee for membership processing.
- Please note FTE - Full-Time Equivalent equates 2 part-time employees to 1 full-time employee
- Please note membership is limited to one business. Multiple businesses must register each business
- Fees Include: Ontario Chamber of Commerce and Canadian Chamber of Commerce Membership
- **Members agree to abide by the Chamber of Commerce By-Laws**
- Cheques payable to Napanee & District Chamber of Commerce; **Payment by Visa or MasterCard also accepted**

Member Profile - Additional Information

Member Services Program Interests: <input type="checkbox"/> Cost-Saving Programs <input type="checkbox"/> Member to Member (M2M) Options <input type="checkbox"/> M2M Incentive to Offer <input type="checkbox"/> Chamber Insurance <input type="checkbox"/> Seminars/Education <input type="checkbox"/> Networking Opportunities <input type="checkbox"/> HOST a Networking Social <input type="checkbox"/> Advertising Options <input type="checkbox"/> Sponsorship Options <input type="checkbox"/> Ribbon Cutting <input type="checkbox"/> Other (Please Identify):	Association Interests: <input type="checkbox"/> Board of Directors <input type="checkbox"/> Membership Committee <input type="checkbox"/> Policy/Advocacy Committee <input type="checkbox"/> Events Committee
Description of services and/ or products (This info will be uploaded to your online directory listing): <input type="checkbox"/> Logo? Send us your logo for upload to our online directory. Size requirement: 100x100pixels	

Please designate an employee/owner responsible for voting in Chamber Elections:

Name _____ Position _____

Signature _____ Date _____

Complete & Return to: Napanee & District Chamber of Commerce | Napanee Business Centre
47 Dundas St. E, Napanee, ON K7R 1H7
Phone: 613-354-6601 | Email: inquiry@napaneechamber.ca

VISA/MC #: _____ Expiry Date: _____