



Chamber of Commerce

UPPER OTTAWA VALLEY

Membership Application Form

By completing and submitting the following application for membership in the Upper Ottawa Valley Chamber of Commerce, and upon acceptance by the Board of Directors, the member acknowledges they are aware of the rules and regulations regarding Chamber membership, and agree to abide by them. The business also agrees to have an appointed representative of the business attend the general membership meetings throughout the year.

Business Name:			
Address:			
City, Province, Postal Code:			
Phone:		Fax:	
Email:			
Website:			
Contact Person:		Position:	
How long has your business been in existence?			
Business Type (Yellow Pages category listing):			
Full Time Employees (3 part time = 1 full time):			
Did someone refer you to the Chamber? If so, who?			

Company Profile (briefly and clearly describe your business, what services and/or products you provide. The box will expand as you type.)

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<input type="checkbox"/>	Yes, please include my information on the Chamber website for information.
<input type="checkbox"/>	Yes, I wish to receive electronic mailings of notices, announcements and newsletters from the UOV Chamber.(You can unsubscribe at any time)

Signature:	
Date:	

For Chamber Use Only:

Date Approved:	Payment Received:	Receipt Number:
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