



Member Investment Agreement

Membership Information:

Membership Name

Street Address

Mailing Address

City State Zip

Phone Fax

E-Mail Web Address

Business Description (for Membership Directory)

Number of Employees Year business established

Principal Representative (Mr./Ms.)

Additional Representatives:

(Mr./Ms.) _____

(Mr./Ms.) _____

(Mr./Ms.) _____

(Mr./Ms.) _____

We Mean Business!

Roosevelt County Chamber of Commerce

Payment Instructions:

I hereby apply for membership in the Roosevelt County Chamber of Commerce agreeing that my annual dues will be \$_____, payable on an annual basis.

Please Select Payment Option (first payment must accompany application):

- Annually
- Semi-Annually
- Check
- Cash
- Credit Card

Authorized Signature

Date

Deduction:

Membership investments are deductible as a necessary business expense to the extent allowed by law.

Committee Service:

I'm interested in serving on the following committees:

- Ag Expo
- Chamber Ambassadors
- Heritage Days
- Military Affairs (additional fees required)