



Membership Application

P.O. Box 33
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www.Brooklynwisconsin.com

- I/We hereby request membership in the Brooklyn Area Chamber of Commerce, and pledge to invest \$ _____ per the fee schedule
- I/We have checked the appropriate box in the fee schedule which fairly represents the category of our membership (business, organization, or individual).
- I/We wish to be contacted regarding committee assignments.

Fee Schedule: (Please check the box which applies)

- \$35 Associate Membership (non-voting membership; for non-business or inactive businessperson, service groups, non-profit organizations, government entities, schools, churches or clubs)
- \$65 Self-employed/home-based business (no employees)
- \$125 Small business or professional membership (1-5 employees)
- \$200 Medium business membership (6-20 employees)
- \$300 Large business membership, industry or utility (21+ employees)
- \$500 Very large business membership (negotiable by Board action)

*Please note that two or more employees working a total of 40 hours per week count as one employee for the purposes of this fee schedule.

Business/Member Name: _____

Address: _____

Mailing Address: _____

City/State/Zip: _____

Phone: _____

Cell Phone: _____

Email: _____

Website: _____

Description of Business: _____

Years in Business: _____

Contact Person: _____

Contact Person's Phone: _____

Contact Person's Email: _____

Today's Date: _____