

Joliet Chamber Business Builders Membership Application

Business / Organization Name: _____

Physical Address: _____ City _____ State ___ Zip _____

Phone: () _____ Cell Phone: () _____

Fax: () _____ E-Mail Address: _____

Website: _____

Main Representative _____

Day Applying For:

Additional Representative: _____

Tuesday / Friday

Description of Organization / Company Profile:

Initiation Fee: \$30

Monthly Dues of \$10 (Payable in 2 six month session sums)

Session 1: April ___ May ___ June ___ July ___ August ___ September ___

Session 2: October ___ November ___ December ___ January ___ February ___ March ___

(Please check the number of months that your first session will cover and multiply the # of months checked by 10 for your first payment of monthly dues)

I/We agree to adhere to the Joliet Region Chamber of Commerce & Industry's Business Builders Policies and Procedures and that acceptance of this contract is subject to approval by the Business Builder Governing Board.

Signed: _____ Date _____

Method of payment: ___ Check ___ Cash ___ Visa ___ M/C ___ Amex ___ Discover

Card Number _____ Exp ___ / ___ Signature _____

Billing Zip Code _____ Security Code _____