



A division of the Joliet Region Chamber of Commerce & Industry

Business / Organization Name: _____

Representative Name: _____

Physical Address: _____

City _____ State _____ Zip _____ E-mail _____

Phone: () _____ - _____

Fax: () _____ - _____

Description of Organization _____

Membership Dues: _____ \$45.00 for Individual Membership if Joliet Chamber Member

_____ \$100.00 for Individual Membership if Non-Chamber Member

Membership fees are billed annually on the anniversary date. Payment due with application

Please Make Checks Payable to: Joliet Chamber of Commerce

Method of Payment: _____ Check _____ Visa _____ MC _____ Amex _____ Discover

Credit Card Number _____

Sec Code _____ Exp. Date ____ / ____

Signature: _____

