



Pewaukee Chamber of Commerce

1285 Sunnyridge Road
Pewaukee, WI 53072

262.691.8851/Phone
262.691.0922/Fax

E-mail: info@pewaukeechamber.org

APPLICATION FOR ANNUAL MEMBERSHIP

Business Name: _____

Primary Contact: _____ Position/Title: _____

E-Mail Address (use back side to include all representatives from your organization you would like to receive emails and attend Chamber events): _____ Web Site: www. _____

Additional Email Contact for chamber emails: _____

Mailing and Billing Address: _____ LinkedIn Address: _____

Physical Address Location: _____ Face Book Address: _____

City: _____ State: _____ Zip: _____

Business Phone Number: _____ Fax Number: _____

Number of Full and Part Time Employees _____ Dues Amount Enclosed: _____

Main Business Category _____ Who referred you to join? _____

Please give a brief description of your business (50 words or less).

Why you joined the chamber: _____

Signature: _____ Date: _____

ANNUAL MEMBERSHIP DUES MUST BE SUBMITTED WITH THIS APPLICATION (check or credit card)

DUES ARE BASED ON NUMBER OF EMPLOYEES. PLEASE SEE CHART.

Category	Dues Amount
1-25 EMPLOYEES	\$225.00
26-50 EMPLOYEES	\$300.00
51-100 EMPLOYEES	\$350.00
101-300 EMPLOYEES	\$400.00
301+ EMPLOYEES	\$500.00

Dues are for 12 months renewable one year from the month you join. www.pewaukeechamber.org Credit Card Type: _____
Credit Card Number _____ Exp Date: _____

RETURN COMPLETED APPLICATION WITH YOUR CHECK TO THE PEWAUKEE CHAMBER OF COMMERCE.
EMAIL JPEG PICTURE (LOGO PREFERRED) TO INFO@PEWAUKEECHAMBER.ORG FOR INCLUSION ON WEBSITE

Pewaukee Chamber of Commerce, 1285 Sunnyridge Rd., Pewaukee, WI 53072 www.pewaukeechamber.org