

APPLICATION FOR MEMBERSHIP

COMPANY/ORGANIZATION NAME:	
CONTACT PERSON:	
PHYSICAL ADDRESS & MAILING ADDRESS:	
WEBSITE ADDRESS:	
PHONE #: FAX#:E-MAIL:	
NATURE OF YOUR BUSINESS:	
WHAT ARE YOUR EXPECTATIONS OF THE STONEWALL & DISTRICT CHAMBER OF COMMERCE?	

EVERYONE HAS AN AREA OF EXPERTISE. WHAT DO YOUR FEEL IS YOUR AREA AND HOW DO YOU FEEL YOU WOULD BE ABLE TO CONTRIBUTE TO THE STONEWALL & DISTRICT CHAMBER OF COMMERCE?

Membership fee **\$122.50** plus gst yearly. (*\$128.63 including gst*) Please remit payment and application to: **The Stonewall & District Chamber of Commerce Box 762 Stonewall, Manitoba ROC 2Z0**

For further information please contact membership coordinator: **Chris**ty **Brown 467-5836** or e-mail **info@stonewallchamber.com**.