

**ADAMS COUNTY CHAMBER OF COMMERCE  
2008 NEW ORGANIZATION MEMBERSHIP APPLICATION**

**Organization:**

Name: \_\_\_\_\_ Phone \_\_\_\_\_ Fax \_\_\_\_\_

Address: \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_  
                  P.O. B. – Street #                   City                   State                   Zip

Township: \_\_\_\_\_

E-mail \_\_\_\_\_, Website \_\_\_\_\_

**Contact Person Information:**

Name and Title: \_\_\_\_\_ Phone \_\_\_\_\_ Fax \_\_\_\_\_

Address: \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_  
                  P.O. B. – Street #                   City                   St.                   Zip

Township: \_\_\_\_\_ Will you participate in Chamber activities? Yes \_\_\_\_ No \_\_\_\_

Activities Preferred: Committees \_\_\_\_\_ Events \_\_\_\_\_ Board Member \_\_\_\_\_

\$ 65.00                   Y/N \_\_\_\_\_  
  Dues Paid                   Receipt requested?

Signature: \_\_\_\_\_

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Please make checks payable to: **Adams County Chamber of Commerce**  
  **P.O. Box 398**  
  **West Union, OH 45693**  
  Phone (937) 544-5454   Fax (937) 544-6957

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**2008 Dues for Organization Membership ..... \$65.00**