



AVON/CANTON CHAMBER OF COMMERCE

Membership Application

ABOUT YOUR BUSINESS

Business Name	
Contact(s) for Online Directory	
Business Address	Business Telephone
	Email
Website	
# Fulltime Employees	Dues (from chart) \$
Description of the Business:	

BILLING INFORMATION

Paper Bills ____ Email Bills ____	Contact
Billing Address	Telephone
	Email

Did an existing member refer you? Name _____

Are you interested in opportunities to work on Chamber Projects? ____ Yes ____ Not right now
(Local First, Jingle Bell Trolley, Community Shred, Valley Vibes Podcasts, Membership)

Membership Dues Chart:

# Fulltime Employees (30+ hours/week)	Annual Dues
1 to 3	\$160
4 to 10	\$210
11 to 20	\$310
21 to 50	\$375
51 to 75	\$465
76 to 100	\$605
101 to 125	\$685
126 to 150	\$795
151+	\$895

Please mail with payment to:
Avon/Canton Chamber of Commerce
304 West Main St.
Suite 2 #206
Avon, CT 06001

Signed _____ **Date** _____

Contact us: Executive Director – (860)675-4832, ext 1; email: avonchamber@sbcglobal.net
 www.avonchamber.com