



Bracebridge Chamber of Commerce Membership Application

Name of Business: _____

Location: _____

Mailing Address: _____

Town: _____ Postal Code: _____

Telephone Number: _____ Fax: _____

Toll Free Number: _____ No. of Staff (peak season): _____

Email: _____ Website: _____

Owner: _____ Contact Person: _____

Type of Business: _____ Referred By: _____

Signature: _____ Date: _____

ANNUAL FULL MEMBERSHIP FEE	190.00
HST #R106804933	<u>24.70</u>
Total:	\$214.70
ASSOCIATE MEMBERSHIP	90.00
(2nd Business of Same Owner OR non-profit Community Organization)	
HST #R106804933	<u>13.50</u>
Total:	\$103.50

Chamber Membership Fees, in whole or in part, are non-refundable.

We accept cash, cheque, VISA, MasterCard, or Debit.

Apply simply by sending or dropping off this completed form along with your payment to:

Bracebridge Chamber of Commerce
1 Manitoba St., 2nd Floor
Bracebridge, ON P1L 1S4

Membership is Subject to Board of Director's Approval.

Applicant agrees to uphold and abide by the Mission Statement, Values and Primary Function of the Bracebridge Chamber of Commerce as published on www.bracebridgechamber.com/about-us.

Phone (705) 645-5231 Fax (705) 645-7592

Email: chamber@bracebridgechamber.com Website: www.bracebridgechamber.com

The Chamber does not collect, use or disclose personal information of individuals except when individuals give consent and provide the information on a voluntary basis. Any personal information that the Chamber retains is kept in such a manner as to ensure its security and confidentiality at all times. For more information, please see our Privacy Policy listed on the Bracebridge Chamber of Commerce website at www.bracebridgechamber.com.