



Please complete this application and return with payment to the Chamber office. If payment is made by credit card, call the Chamber to make arrangements. Private addresses will not be published online. Note: Payment plans are available.

Name: _____ Title (If Applicable): _____

Date of Birth (DD/MM/YYYY): _____

Company Name (If Applicable): _____

Address: _____ Private: ___ Public: ___ (please check)

City: _____ Province: _____ Postal Code: _____

Phone: _____ Fax: _____ Toll Free: _____

E-Mail: _____ *E-Mail is for Chamber use Only

I approve the Chamber to utilize my e-mail address provided to receive any correspondence from the Chamber (ie/ Newsletters, e-news, time sensitive information for members). I also understand that I may "unsubscribe" from the Chamber email correspondence at any time.

Website: _____ Facebook URL: _____

Total number of owners/employees: _____ Full Time: _____ Part Time: _____
The year the firm was established in North Bay or area: _____

***Please note, only the YP is a member, if you wish to include staff please use regular membership application.**

Briefly describe services or products:

How did you hear about the North Bay & District Chamber of Commerce _____

Yes, I will allow my basic information to be displayed on the Chamber membership list, website, & my company information given as referrals (under the Privacy Legislation Act, we require your permission)

Or **No**, please contact me to clarify

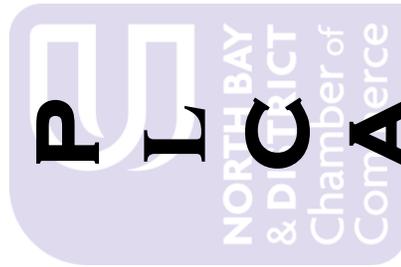
How can the North Bay & District Chamber of Commerce help you get the most out of your membership?
(ie. Networking, Advertising, Employee Benefits)

Website Listing Categories

Please choose **1 or more** of the following categories to have your company listed on our website.

Accommodations <input type="checkbox"/>	Food & Dining <input type="checkbox"/>	Real Estate <input type="checkbox"/>
Arts & Photography <input type="checkbox"/>	Health & Medicine <input type="checkbox"/>	Recreation & Sports <input type="checkbox"/>
Automotive <input type="checkbox"/>	Home & Garden <input type="checkbox"/>	Retail Products & Services <input type="checkbox"/>
Business Services <input type="checkbox"/>	Independent <input type="checkbox"/>	Retirement Living <input type="checkbox"/>
Communications <input type="checkbox"/>	Legal & Financial <input type="checkbox"/>	Tourism & Leisure <input type="checkbox"/>
Community <input type="checkbox"/>	Manufacturing & Distribution <input type="checkbox"/>	Trades & Contracting <input type="checkbox"/>
Computers Services <input type="checkbox"/>	Marketing & Advertising <input type="checkbox"/>	Transportation <input type="checkbox"/>
Consulting Services <input type="checkbox"/>	Not-For-Profit <input type="checkbox"/>	Young Professional <input type="checkbox"/>
Education <input type="checkbox"/>	Personal Care <input type="checkbox"/>	
Entertainment <input type="checkbox"/>	Printing <input type="checkbox"/>	

Y P A P P L I C A T I O N



“Get Involved – Make New Business Connections!”

2018 Membership Fee Structure

<i>No. Of Employees/Owners</i>	<i>Annual Fee</i>	<i>13% H.S.T.</i>	<i>Total</i>
Young Professionals - Under 30	55.00	7.15	62.15
Not For Profit	176.00	22.88	198.88
0 – 2	176.00	22.88	198.88
3 – 4	225.00	29.25	254.25
5 – 10	274.00	35.62	309.62
11 – 25	390.00	50.70	440.70
26 – 50	545.00	70.85	615.85
51 – 75	621.00	80.73	701.73
76 – 100	733.00	95.29	828.29
101 – 150	782.00	101.66	883.66
151 – 250	848.00	110.24	958.24
Over 250	914.00	118.82	1032.82
**Entrepreneur	50% off Concurrent Businesses		
**Entrepreneur Membership – this category has been designed to help business owners with multiple business market them more affordably. The largest business will pay full price & each concurrent business owned by the same entrepreneur will receive 50% off their regular membership fee, but will not receive additional voting rights.			

- 2 part-time employees will constitute 1 full-time employee
- Membership fees are tax deductible as a business expense

I would like to pay by:

Cheque **Cash** **Debit**
Visa **MasterCard**

In the amount of: \$ _____

Card # _____

Expiry: ____/____

Signature: _____