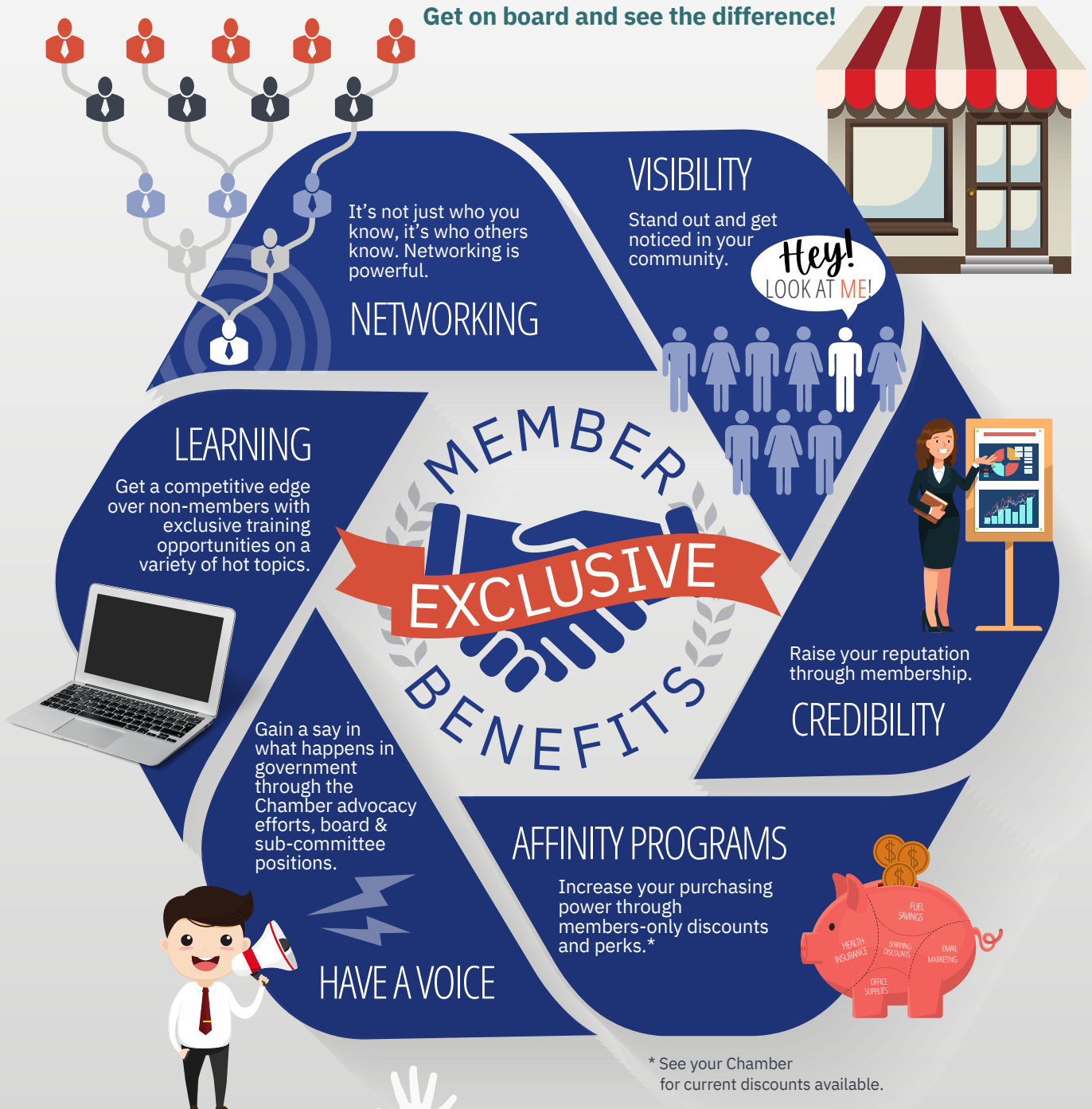


WHY JOIN YOUR CHAMBER?

Associations are stronger than ever. By joining, you get members-only perks, exclusive advertising and networking opportunities, and a whole lot of exposure for yourself and your organization.

Get on board and see the difference!



@SimcoeChamber

simcoechamber.on.ca

JOIN US

Contact the Simcoe & District Chamber of Commerce to learn more about **benefits of membership today!**



MEMBERSHIP FORM

SIMCOE & DISTRICT
CHAMBER OF COMMERCE

MEMBERSHIP FEE SCHEDULE

<input type="checkbox"/> Owner	\$175.00	<input type="checkbox"/> Not-for-Profit	\$125.00
<input type="checkbox"/> 2 to 10	\$250.00	<input type="checkbox"/> Individual/Retired	\$75.00
<input type="checkbox"/> 11 to 25	\$275.00	<input type="checkbox"/> New Entrepreneur*	\$100.00
<input type="checkbox"/> 26 to 50	\$325.00	<input type="checkbox"/> Student**	\$25.00
<input type="checkbox"/> 51 to 75	\$375.00	<div>All memberships subject a \$15.00 OCC & CCC Affiliate fee and HST *New Entrepreneur: First 2 years of Business **Student Membership fees & tax inclusive</div>	
<input type="checkbox"/> 76 to 100	\$425.00		
<input type="checkbox"/> 101 to 500	\$800.00		
<input type="checkbox"/> 501 & over	\$1,000.00		

BUSINESS INFORMATION

Business Name :			
Address :			
Phone Number :			
Contact Name :			
E-mail :			
Phone Number :		Date Business Established :	
Website :		# of Employees : Full time	Part time
Products & Services :			
Social Media :	Facebook	Instagram	Twitter

**Please note that your business will be included in our online directory. If there is any information you wish to be displayed differently from that above, please let us know.

I understand that in joining this Chamber, my business information will be used for mail/email of Chamber information, events and newsletters, it will be posted on the Chamber website, including email and website links if available, and my business will be identified as a member on our website directory.

Applicants / Account Holder's Name : _____
Signature Of Author

<input type="checkbox"/> Visa	_____	_____	_____
<input type="checkbox"/> Mastercard	Name on Card	Credit Card #	Expiry Date

THANK YOU FOR YOUR INFORMATION

Remit cheque to: 10 Argyle Street Simcoe ON N3Y 1V5
Online @ <https://simcoechamber.on.ca/shop> | E-transfer: accounting@simcoechamber.on.ca