

New Castle Chamber of Commerce

Membership Application / Invoice



Would you like to be listed on the Business Directory Web Page? Yes No

Name:* _____

Business
Name: _____

Street
Address: _____

Mailing
Address:* _____

Phone:* _____ Fax: _____

E-mail Address: _____

Web Site Address:
http://www. _____

Invoice:

\$ _____	Business Membership Dues (1-9 employees \$100.00, 10 + employees \$200.00)
\$ _____	Non-Profit, Religious, Government (\$75.00)
\$ _____	Individual (non-business) (\$50.00)
\$ _____	Advertising (from enclosed advertising form)
	Services:
	_____ Business of the Month (\$60.00)
	_____ Folio (\$.10 per folio)
\$ _____	Sponsorship

Total \$ _____

Mail completed application with payment to: **New Castle Chamber of Commerce**, P.O. Box 983
New Castle, CO 81647

Questions? Contact the Chamber at 984-2897 or email newcastlecc@sopris.net