



# STILWELL CHAMBER

STILWELL AREA CHAMBER OF COMMERCE

Application/Renewal

**BUSINESS INFORMATION:**

Company \_\_\_\_\_

Primary Contact: \_\_\_\_\_ Title: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Billing Contact: \_\_\_\_\_ Title: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Business Address: \_\_\_\_\_ City: \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_ Fax: : (\_\_\_\_) \_\_\_\_\_

Company Website: \_\_\_\_\_

Key Search Words for the on-line Member Directory: \_\_\_\_\_

Referred By: \_\_\_\_\_

Would you be interested in becoming a Stilwell Chamber of Commerce Board Member? \_\_\_\_\_

Do you have business associates that you believe can benefit from the Stilwell Chamber of Commerce? \_\_\_\_\_  
If so may we contact you for more information? \_\_\_\_\_

<b>MEMBERSHIP FEES:</b>	<b>ANNUAL DUES: (Circle)</b>
1 – 2 Employees	\$45
3 - 4 Employees	\$55
5 – 15 Employees	\$65
16 – 30 Employees	\$100
31 –50 Employees	\$135
51 – 75 Employees	\$165
76 to 100 Employees	\$200
101 to 250 Employees	\$230
251 or 500 Employees	\$330
500 or more Employees	\$550
Professional (Doctors, Lawyers, Etc..)	\$60
Utility	\$175
Bank	\$200
Church, Civic Club	\$25
Individual	\$25
Couple	\$40
Senior Citizen (65+)	\$20
<b>TOTAL AMOUNT DUE:</b> <b>(Receipt Will Be Emailed)</b>	\$ _____

**PAYMENT INFORMATION:**

Payment Method:  Check (Please Mail Checks W/Application to **PO Box 845, Stilwell, OK 74960**)

Membership Categories & Additional Representatives on Reverse Side

### Membership Categories

**PLEASE CHECK ALL THAT APPLY:**

	<b>Advertising &amp; Media</b>		<b>Arts, Culture &amp; Entertainment</b>
	<b>Automotive &amp; Marine</b>		<b>Business &amp; Professional Services</b>
	<b>Computers &amp; Telecommunications</b>		<b>Construction Equipment &amp; Contractors</b>
	<b>Family, Community &amp; Civic Organizations</b>		<b>Finance &amp; Insurance</b>
	<b>Government, Education &amp; Individuals</b>		<b>Healthcare</b>
	<b>Home &amp; Garden</b>		<b>Industrial Supplies &amp; Service</b>
	<b>Legal</b>		<b>Lodging &amp; Travel</b>
	<b>Personal Services &amp; Care</b>		<b>Pets &amp; Veterinary</b>
	<b>Real Estate, Moving &amp; Storage</b>		<b>Religious Organizations</b>
	<b>Restaurants, Food &amp; Beverage</b>		<b>Shopping &amp; Specialty Retail</b>
	<b>Sports &amp; Recreation</b>		<b>Transportation</b>

**ADDITIONAL REPRESENTATIVES:**

**Name:** \_\_\_\_\_ **E-Mail:** \_\_\_\_\_

**Phone:** (\_\_\_\_) \_\_\_\_\_ **Fax:** : (\_\_\_\_) \_\_\_\_\_

**City:** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip** \_\_\_\_\_

(If Different From Primary Contact)

**Name:** \_\_\_\_\_ **E-Mail:** \_\_\_\_\_

**Phone:** (\_\_\_\_) \_\_\_\_\_ **Fax:** : (\_\_\_\_) \_\_\_\_\_

**City:** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip** \_\_\_\_\_

(If Different From Primary Contact)

**Name:** \_\_\_\_\_ **E-Mail:** \_\_\_\_\_

**Phone:** (\_\_\_\_) \_\_\_\_\_ **Fax:** : (\_\_\_\_) \_\_\_\_\_

**City:** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip** \_\_\_\_\_

(If Different From Primary Contact)

**Please Mail Completed Form and Payment to:  
Stilwell Area Chamber of Commerce, PO BOX 845 Stilwell, OK 74960**