

Membership Application Form

Business Name: _____

Owner/Manager: _____

Mailing Address: _____

Phone: _____ Email: _____

Short Description of Your Business for Marketing purposes (optional)

# of Employees	Delegates	Dues	GST	Total
0-10	1	\$133.33	\$6.67	\$140.00
11-50	2	\$266.67	\$13.33	\$280.00
51+	3	\$542.86	\$27.14	\$570.00
Associate Member*	None	\$66.67	\$3.33	\$70.00
Non-Profit Organizations	None	\$66.67	\$3.33	\$70.00
Total Dues:				\$ _____

Membership Dues are Non-Refundable

I understand that membership is a privilege and will make every effort to adhere to the Trail & District Chamber of Commerce Code of Conduct. As a member of the Trail & District Chamber of Commerce (the Chamber), I will:

1. Conduct business in a manner that reflects honourably on the Chamber and the business community
2. Understand, support and promote the mission and goals of the Chamber
3. Support the activities of the Chamber, and where possible, lend my business/professional expertise
4. Play a role to promote, develop and enhance business growth in the region.

Associate Membership*

Any person or business located other than in Trail, Rossland, Warfield, Montrose, Fruitvale, RDKB Areas A & B that currently hold a membership, in good standing, with another Chamber of Commerce may apply to the Board of Directors for Associate Membership status. Such memberships will be non-voting, but otherwise will participate in all usual membership privileges.

Application Date _____