

HAMPTON BAYS CHAMBER OF COMMERCE
140 WEST MAIN STREET,
HAMPTON BAYS, NEW YORK 11946
Tel. 631 728-2211 Fax 631 728-0308
www.hamptonbayschamber.com

Membership Application – January 1, 2011 – December 31, 2011

Business Information

New Member _____ Renewal _____ Referred by: _____
Corporate Name _____
DBA _____
Mailing Address _____
Business Location _____
Business Phone _____ Fax _____
Website _____ E-Mail _____
Name(s) of Principles _____
Name of Contact Person _____
Type of Business _____
Years in Business _____ Seasonal _____ Year-round _____
Off-Season Contact Name _____
Address _____
Phone _____ Fax _____

I hereby make application for membership in the Hampton Bays Chamber of Commerce. I understand that this application is subject to an approval vote by the Board of Directors. To be a member in good standing, I am expected to abide by the rules and regulations of this organization, to try to attend membership meetings and actively participate and support all events sponsored by the Chamber of Commerce.

Signature _____
Print Name _____
Title/Position _____

Annual dues are payable by January 1st of each year.

Regular Business.....	\$150.00
Accommodations (lodging) 5 Units and under.....	\$200.00
Accommodations 6 Units or more.....	\$225.00

Description of your business: _____

