

# Sand Springs Area Chamber of Commerce 2016 Business Membership Application

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Business Name \_\_\_\_\_

Contact Person \_\_\_\_\_ Title \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Telephone \_\_\_\_\_ FAX \_\_\_\_\_

E-Mail \_\_\_\_\_ Web Address \_\_\_\_\_

- Yes, I would like to be active in the Sand Springs Area Chamber of Commerce and assist with some of the annual activities sponsored by the organization.

### **Annual Dues can be paid one of three ways: dues based on business type**

**Pay in full**

CC # \_\_\_\_\_ Exp \_\_\_\_\_ or check

Chamber of Commerce Investments are Tax-Deductible, only as a Business Expense

- Quarterly (\$75 per quarter)
- Monthly/ACH Bank Draft (\$25 per month)

Checking account # \_\_\_\_\_

Routing # \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Please make checks payable to:  
Sand Springs Area Chamber of Commerce  
1 W. 1<sup>st</sup> St.  
Sand Springs Ok 74063  
918-245-3221

*Thank you for supporting Sand Springs, Oklahoma!*

