



PO Box 57 SIDNEY, NY 13838

607-561-2642

VISIT US ON THE INTERNET AT www.sidneychamber.org

APPLICATION FOR BUSINESS MEMBERSHIP

Business Name _____

Business Address _____
(Physical address)

Telephone: (____) _____ Fax: (____) _____

Mailing Address (If different from physical address) _____

E-mail (to receive minutes and other Chamber related notices) If more than one person, list on back.

Website _____

Contact Person _____

Category you would like your business listed under: _____

Please explain the nature of your business: _____

Our annual membership dues are \$60 per member if paid by August 31st, Payments received after August 31st will be \$70. Our year runs from July 1st to June 30th.

Please send your check payable to Sidney Chamber of Commerce to:

Sidney Chamber of Commerce
PO Box 57.

Sidney, NY 13838

Date of application: _____

PO BOX 57 Sidney, NY 13838-2295 ▪ Email: office@sidneychamber.org ▪ Website: www.sidneychamber.org