



MANCELONA REGIONAL CHAMBER OF COMMERCE
Business Profile Form | PO Box 558 | Mancelona MI 49659 (231) 587 5500

BUSINESS INFORMATION:

Name: _____

Month/Year Est. _____

Attn. _____

PHYSICAL ADDRESS:

This address is published on the Chamber website:

MAILING ADDRESS:

This address is not published unless it is the same as your physical address.

PHONE NUMBERS:

(_____) _____ (_____) _____ Fax: (_____) _____

WEBSITE & EMAIL ADDRESS:

Website: _____ Email: _____

Please provide your email address so we may send you our monthly E-Newsletter. We no longer send them by mail.

NATURE OF BUSINESS & PRODUCTS/SERVICES:

Business Type: _____

DUES PAYABLE

(January 1 through December 31) \$75

Option: To have your business card on home page of Chamber website, please add \$15 and pay \$90

IMPORTANT: RETURN THIS ENTIRE COMPLETED FORM with your dues to address above.

It will be kept in our permanent membership file.

BELOW THIS LINE IS FOR CHAMBER USE ONLY:

Dues: \$ _____ Biz Card: \$ _____ Expires _____

Check # _____ Date: _____

DB _____ SOBI _____ EM _____ BIZ _____