



309 Broad Street, Suite 2, New Bethlehem, PA 16242  
 redbankchamber.com • info@redbankchamber.com • Phone 814-275-3929 • Fax 814-275-4269

### Membership Application

I hereby apply for membership in the Redbank Valley Chamber of Commerce. Full time employees count as one, part-time employees count as one-half.

#### **Redbank Valley Chamber of Commerce Member Dues Structure**

##### For-Profit Employers

51 or More Employees	\$250.00
11 – 50 Employees	\$200.00
6 – 10 Employees	\$150.00
0 – 5 Employees	\$100.00

##### Non-Profit Employers

16 or More Employees	\$150.00
0 – 15 Employees	\$50.00

##### Individual Membership

Individual Member	\$50.00
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##### Multiple Common Ownership Businesses

The business with the greatest number of employees pays the full membership rate based on the above membership structure. Each additional business receives a 50% discount rate based on the above membership structure.

#### **Redbank Valley Chamber of Commerce Member Benefits**

- Listing on chamber website with a link from our site to yours.
- Weekly Email blasts with community announcements.
- Display space in the chamber office for your brochures.
- The right to use the chamber logo on your site and publications.
- Business referrals from the chamber.
- Networking opportunities to build partnerships, develop relationships, and share ideas with fellow members.
- Sponsorship opportunities for chamber events to help promote your business.
- Business development and opportunities to benefit the “Quality of Life” in the Redbank Valley Community.
- Ribbon cutting ceremonies for your grand opening, anniversary or milestone.
- The Chamber has partnered with Trinity Solutions (LegalShield Service Provider) to offer discounted rates for legal consultation, identity theft protection, living wills, correspondence, document & contract review, debt collection letters & more.

New chamber members receive a first year 50% discount on their member dues.

Firm Name: \_\_\_\_\_ Contract Person: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ E-Mail: \_\_\_\_\_ Category: \_\_\_\_\_

Web Page Address: \_\_\_\_\_ Annual Dues: \_\_\_\_\_

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



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**NEW MEMBER QUESTIONNAIRE**

Please complete and return to the Chamber office along with your dues payment. This form will be forwarded to the Leader Vindicator for a brief article welcoming your firm as the newest member of the Chamber.

Name of Business: \_\_\_\_\_

Address: \_\_\_\_\_

Owner(s) Name: \_\_\_\_\_

Manager(s) Name: \_\_\_\_\_

Any Other Pertinent Information:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Date Established: \_\_\_\_\_

History (Always at same location?) Other relevant information:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Type of Business (retail store, insurance agency, restaurant): \_\_\_\_\_

Brief Description of Business (items for sale, services, menu):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Names of Employees, Full & Part-time, Years of Service, Any Other Pertinent Information:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_