

Membership Application



Seneca Salamanca Chamber of Commerce
734 Broad Street Suite 103
Salamanca, New York 14779
(716) 945-2034
www.salamancachamber.org
john@salamancachamber.org

Office Use Only
<input type="checkbox"/> Welcome Packet
<input type="checkbox"/> Membership Sticker
<input type="checkbox"/> Email List
<input type="checkbox"/> Staff Email
Rep _____

Business Information

Business Name: _____

Location Address: _____

Mailing Address *if different*: _____

Phone: _____ Second Phone: _____ Fax: _____

Website: _____ Business Email Address: _____

Representatives

Primary Contact: _____ Title: _____

Email: _____ Phone/Ext: _____

President/CEO: _____ Title: _____

Email: _____ Phone/Ext: _____

Contact: _____ Title: _____

Email: _____ Phone/Ext: _____

Contact: _____ Title: _____

Email: _____ Phone/Ext: _____

***By providing email addresses, you give the Seneca Salamanca Chamber of Commerce permission to send you emails related to Chamber programs. The Chamber does not sell, rent, publish or distribute the email addresses of its membership.*

(continued on other side)

Number of Employees: full time _____ part time _____

Date Business/Organization Founded: _____

How did you hear about the Chamber? _____

Directory Classification: _____

What services are you interested in learning more about? (circle all that apply)

- Health/Dental/Vision Insurance Member Benefits Advertising Options
Shop Salamanca Sponsorship Opportunities Networking Opportunities
Volunteer Committees Member to Member Discounts Training Programs
Promotional Opportunities Grand Opening/Open House
-

Annual Membership Dues

Your Seneca Salamanca Chamber of Commerce membership is tax deductible.

Self Employed (no employees)	\$125
1-20 Employee(s)	\$150
Over 20 Employees	\$185
Additional Business/Location Listing	\$50

Make Checks Payable to:
Seneca Salamanca Chamber of Commerce or
SSCC

Amount Enclosed - \$_____

Signed: _____ Date: _____

PLEASE RETURN THIS FORM AND PAYMENT TO:

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