

Mount Baker Foothills Chamber of Commerce
P.O. Box 866 Maple Falls, WA 98266-0866
Membership Application



Please complete the following form and submit it with your payment (checks only please) to: Mt. Baker Foothills Chamber, P.O. Box 866 Maple Falls, WA 98266; Attn: Treasurer

Dues Structure: Basic Membership - \$75/year
 Supporting Membership - \$150/year
 Sustaining Membership - \$500/year

Business Name:			
Business Address:			
City, State, Zip code			
Business Phone:		Fax No.	
Mailing Address (if different than business address):			
City, State, Zip code			
Type of Business:			
Email address:			
Website address:			
Owner's Name:		Home Phone:	
Owner's Address:			
City, State, Zip code			
Owner's Name:		Home Phone:	
Owner's Address:			
City, State, Zip code			

Note: Please attach a brief description of your business (limited to 100 words)
 Please visit our website at: www.mtbakerchamber.org

My check includes an additional amount to support the following fund(s):

- Visitor Center Volunteer Rewards Fund: Amount \$ _____**
- Foothills Farmer's and Crafts Market: Amount \$ _____**
- Special Event Fund: Amount \$ _____**

Total enclosed: \$ _____