



Custer Area Chamber of Commerce New Membership Form

**Please complete all information and check the boxes of the information
you want listed in publications and on website.**

Business Name: _____

Type of Business: _____

Owner: _____ Contact Person: _____

Physical Address: _____

Mailing Address: _____

Phone #: _____ Other #: _____
(for publication)

Email: _____ Website: _____
(for publication)

Brief description as you want it displayed in all listings (no more than 75 words please):

Signature: _____

The Board of Directors and staff of the Custer Area Chamber of Commerce appreciate your support.
We consider it a privilege to be associated with the entire area.

For Office Use Only:

Date: _____ Paid: _____ Website: _____
Bytes Email: _____ Excel: _____ QuickBooks: _____ Membership Sticker: _____