

chamber of commerce

ORANGE



TEXAS

*small town charm.
world class culture.*

Membership Application

Company: _____

Contact Person: _____

Title: _____

Physical Address: _____

City, State, Zip: _____

Mailing Address: _____

City, State, Zip: _____

Phone: _____

Fax: _____

Email: _____

Website: _____

Business Classification: _____

Recruited by: _____

Authorized by: _____ Date: _____

Investment _____

Semi-Annual _____

Annual _____

Calculate Your Membership Investment

(Please see front for Investment Schedule)

Total Number of Employees _____

Base Investment _____

Addition to Base Investment _____

Distinguished Members _____

One-time tax deductible _____

Total Membership Investment _____

If you have any questions on your Total Investment please contact the Chamber at 409-883-3536.