



# Allendale Chamber of Commerce



## CURRENT MEMBER RENEWAL

Renewal **\$125.00** Non-Profit Renewal **\$100.00**  
Dues are subject to change without prior notice  
Due February 1

### Business Information

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

Company Name: \_\_\_\_\_

Company Name D/B/A:  
(if applicable) \_\_\_\_\_

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

Mailing Address:  
(if applicable) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### Office Phone Numbers

Office \_\_\_\_\_ Fax \_\_\_\_\_ Toll Free \_\_\_\_\_

Company E-Mail Address: \_\_\_\_\_

Web Site Address: \_\_\_\_\_

### Contact Information

#### Main Contact:

Title: \_\_\_\_\_  
Phone or Ext: \_\_\_\_\_ Cell: \_\_\_\_\_  
E-Mail Address: \_\_\_\_\_  
\_\_\_\_\_

#### Alt. Contact:

Title: \_\_\_\_\_  
Phone or Ext: \_\_\_\_\_ Cell: \_\_\_\_\_  
E-Mail Address: \_\_\_\_\_  
\_\_\_\_\_

Current Member Renewal  
Chamber Web Site Information

The chamber will allow a PRIMARY Category and a SECONDARY Category (if applicable) to your primary business (i.e., State Farm **Insurance & Financial Services**). All SECONDARY Categories will be reviewed and approved by the web site committee. Please check [www.allendalenjchamber.org](http://www.allendalenjchamber.org) to see what categories have already been established. You can request a new category subject to approval.

Business Category

Main: \_\_\_\_\_

Secondary: \_\_\_\_\_  
(only if applicable)

Business Slogan: \_\_\_\_\_  
(up to 150 characters)

\_\_\_\_\_

\_\_\_\_\_

Business Description: \_\_\_\_\_  
(up to 500 characters)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Please check applicable boxes:

- I am paying my dues via the chamber website [www.allendalenjchamber.org](http://www.allendalenjchamber.org)
- I am submitting my application via email to: [info@allendalenjchamber.org](mailto:info@allendalenjchamber.org)
- I am mailing a check payable to: Allendale Chamber of Commerce, PO Box 144, Allendale, NJ 07401  
(please include a copy of this application with your check)