Karlstad Chamber of Commerce

Membership Application

Business / Organization Information

Business / Organization Name:

Primary Contact Name:

Title / Role:

Business Address:

Mailing Address (if different):

Phone Number:

Email Address:

Website / Facebook Page:

Membership Category (select one)

- ☐ Small Business (under 10 employees) — $75 / year
- ☐ Large Business / Financial Institution — $150 / year
- ☐ Nonprofit / Home-Based Business — $40 / year
- ☐ Individual Community Supporter — $25 / year

Membership dues are due by March 1 each year.

Agreement

By submitting this application, I agree to support the mission of the Karlstad Chamber of Commerce.

Signature (type full name):

Date:

How to Submit

Email your completed application to ashlee@empressinspired.com, or mail it with payment to:

Karlstad Chamber of Commerce, c/o City Office, P.O. Box 299, Karlstad, MN 56732

Questions? Visit cityofkarlstad.com/chamber-of-commerce or find us at facebook.com/KarlstadCoC