



High Prairie & Area Chamber of Commerce
 office@hpchamber.net
 www.hpchamber.net

High Prairie and Area Chamber of Commerce Membership Form 2016

Business Name: _____

Legal Name (if different from above): _____

Contact Name: _____

Mailing Address: _____ Physical Address: _____

Town: _____ Postal Code: _____

Phone#: _____ Fax#: _____

Cellphone (for office use, only): _____

Email Address: _____

Website: _____

Would you like to receive emails from the Chamber? Yes No

Would you like your information listed on our website? Yes No

If yes, what information:

Physical Address:	Yes	No	Phone #:	Yes	No	Fax #:	Yes	No
Email Address:	Yes	No	Website:	Yes	No			

Number of Employees: _____ Invoice#: _____

2016 Annual Membership Fee Schedule:

_____ Individual	\$75.00	_____ 6-12 Employees	\$175.00
_____ Non-Profit Organization	\$75.00	_____ 13 or more Employees	\$250.00
_____ 2-5 Employees	\$125.00		

Please mail payment, along with the complete membership form to, the **High Prairie and Area Chamber of Commerce, P.O. Box 3600, High Prairie, AB, T0G 1E0.**

Signature

Date