



TOWN OF HUNTER CHAMBER OF COMMERCE

P.O. Box 177, Hunter, NY 12442

Tel: (518) 263-4900

E-mail: CHAMBERINFO@HUNTERCHAMBER.ORG Website: WWW.HUNTERCHAMBER.ORG

Individual Membership Form 2010

Name: _____

Contact Name: _____

Address for listing: _____

Address for **mailing**: _____

Telephone: (____) _____ Fax: (____) _____

E-mail _____

Please give a brief description of your interest in the Chamber:

Individual Members cannot vote in an Annual or Special General Meeting, but may be elected as a Voting Member of the Board of Directors, or appointed as a member of a committee.

Total Enclosed \$25

TOWN OF HUNTER CHAMBER OF COMMERCE

CREDIT CARD PAYMENT FORM

Name as it appears on the card: _____

Billing Address: _____

[City] _____ [State] _____ [ZIP] _____

[Tel] _____ [Email] _____

Credit Card Type (*circle one*): Visa MasterCard American Express

Card Number: _____ Amount \$ _____

Expiration Date: [mm] _____ [yyyy] _____ (Invoice #: _____)