



Northern Monmouth  
Chamber of Commerce

Monmouth County's Premier Small Business Chamber

"Serving Community and Business since 1959"

MEMBERSHIP APPLICATION

Business Name \_\_\_\_\_

Contact Person \_\_\_\_\_ Title \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

Email \_\_\_\_\_ Web \_\_\_\_\_

Business Category \_\_\_\_\_ # of F/T Employees \_\_\_\_\_

Business Description \_\_\_\_\_

Referred By: \_\_\_\_\_

NMCC Annual Membership Investment

Employees	Rate	Employees	Rate
<u>1-10</u>	175.00	<u>51-99</u>	450.00
<u>11-25</u>	255.00	<u>100-199</u>	660.00
<u>26-50</u>	325.00	<u>200 &amp; up</u>	1,000.00

**\*\*Associate & All Non-Profits \$150.00\*\***

Annual NMCC Membership Investment \$ \_\_\_\_\_

New Member Processing Fee \$ 25.00

Event Sponsorships Available Please Ask For Details Total \$ \_\_\_\_\_

Please Make Checks Payable to: Northern Monmouth Chamber of Commerce  
Charge to Visa MasterCard American Express

Account # \_\_\_\_\_ Exp. \_\_\_\_\_ Zip Code \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

I hereby agree to join with the members of The Northern Monmouth Chamber of Commerce to fulfill the mission of the organization. The annual investment, payable in advance, is agreed to until the Chamber of Commerce shall give at least 30 days notice of increase, reduction or cancellation. A one-time processing fee of \$25.00 to be added with the annual fee application.

Authorized Signature \_\_\_\_\_ Date \_\_\_\_\_

Northern Monmouth Chamber of Commerce  
1340 State Route 36 P.O. Box 5007 Hazlet, NJ 07730  
Office: 732.203.0340 Fax: 732.203.0341 Email director@northernmonmouthchamber.com  
www. NorthernMonmouthChamber.com

**NMCC Annual Membership is a valuable asset for the Promotion of your Companies "Products and Services"  
Join today!**