

2019
MEMBERSHIP AGREEMENT
JACKSON CHAMBER OF COMMERCE
1021 W. COMMODORE BLVD.
JACKSON, NJ 08527
PHONE (732) 833-0005 FAX (732) 833-7033
Website: www.jacksonchamber.com
E-mail: jcinfo@jacksonchamber.com

DATE _____

The undersigned hereby promises to pay annual membership fees as set forth by the Board of Directors of the Jackson Chamber of Commerce. Continued membership is contingent upon the payment of these fees. The **2019** annual membership fee is **\$185.00**.

NAME OF BUSINESS/PROFESSION _____

ADDRESS _____

MAILING ADDRESS _____
(if different from above) _____

REPRESENTATIVE _____

TITLE _____

BUSINESS PHONE _____

BUSINESS FAX _____

EMERGENCY PHONE _____

E-MAIL ADDRESS _____

WEB PAGE ADDRESS _____

BUSINESS CATEGORY _____
(i.e. yellow pages classification)