HAMPTON BAYS CHAMBER OF COMMERCE
PO Box 632
HAMPTON BAYS, NEW YORK 11946
Tel. 631 728-2211 info@hamptonbayschamber.com
www.hamptonbayschamber.com

Membership Application – January 1, 2018 – June 30, 2019

Business Information

New Member _____Referred by:_____ Renewal_____
Corporate Name_____
DBA_____
Mailing Address_____
Business Location_____
Business Phone_____ Fax _____
Website_____E-Mail_____
Name(s) of Principles_____
Name of Contact Person_____
Type of Business_____
Years in Business_____Seasonal_____Year-round_____
Off-Season Contact Name_____
Address_____
Phone_____Fax_____

I hereby make application/renew for membership in the Hampton Bays Chamber of Commerce. I understand that this application is subject to an approval vote by the Board of Directors. To be a member in good standing, I am expected to abide by the rules and regulations of this organization, to try to attend membership meetings and actively participate and support all events sponsored by the Chamber of Commerce.

Signature_____
Print Name_____
Title/Position_____

Annual dues are payable by January 1st of each year.

Regular Business…….		$175.00
Accommodations (lodging)	5 Units and under……..	$225.00
Accommodations	6 Units or more…….	$250.00

Description of your business:_____
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