



150 South Washington, PO Box 190, Afton, WY 83110
307-885-2759 www.starvalleychamber.com

DEVELOPING AND PROMOTING STAR VALLEY'S ECONOMY

MEMBERSHIP APPLICATION

Please return this completed application with your membership premium to the Chamber

BUSINESS NAME _____

CONTACT PERSON _____ JOB TITLE _____

PHYSICAL ADDRESS _____

CITY _____ STATE _____ ZIP _____

BILLING ADDRESS _____

CITY _____ STATE _____ ZIP _____

BUSINESS PHONE _____ FAX _____

EMAIL _____

WEBSITE _____

TYPE OF BUSINESS _____

Home Based Individual For Profit Non Profit

NUMBER OF FULL TIME EMPLOYEES _____

REASON FOR JOINING _____

ANNUAL INVESTMENT AMOUNT _____

METHOD OF PAYMENT Check # _____ Discover Visa Mastercard

Credit Card # _____ Expiration Date _____

Signature _____ Date _____

COMPANY CONTACTS (Will Receive Chamber e-mail)

NAME TITLE E-MAIL

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MAY WE THANK SOMEONE FOR RECOMMENDING THE CHAMBER TO YOU?

NAME EMAIL