



Membership Application Join or Renew Today!

Business/Individual Name: _____

Physical Address: _____

Mailing Address: _____

Email Address: _____

Website: _____

Phone: _____

Please check the appropriate heading for the directory:

- Activities/Recreation
 Accommodations
 Food/Shopping
 Services

Membership Dues

- | | | |
|-------------------------------|---|----------------------------|
| Corporate: | <input type="checkbox"/> New/Renewal Member (Over 100 Employees) | \$250 |
| Business: | <input type="checkbox"/> New/Renewal Member (Under 100 Employees) | \$60 |
| Non-Profit/Individual: | <input type="checkbox"/> New/Renewal Member | \$30 |
| Donation: | <input type="checkbox"/> Additional Contribution | \$100, \$50, \$25, \$_____ |

TOTAL \$_____

Payment:

Please make check payable to: Anchor Point Chamber of Commerce, PO Box 610, Anchor Point, AK 99556

Event you would like to participate with: Visitor Center Calcutta Tournament

X _____
Signature

Date

Thank you for your supporting the Anchor Point Chamber of Commerce!
 "North America's Most Westerly Highway Point"
 PO Box 610 Anchor Point, AK 99556 (907) 235-2600
 apchamber.commerce@gmail.com www.anchorpointchamber.org