

# Membership Application



Thank you for your interest in joining the Copiague Chamber of Commerce. The Copiague Chamber of Commerce is an alliance of businesses, residents and organizations in Copiague, determined to improve the quality of life and general business environment in Copiague. This is carried out via a networking process among all its members. **Annual Dues (due each January 1st).**

**Membership**      Type:    Renewal    New

Select Your Membership Level:

**Regular Member      \$125.00**

**Regular membership** includes "full voting rights" as well as the opportunity to take out "business card sized ads" in the Chamber Centerfold. No other "class of membership" is accorded these privileges and benefits

**Associate Member      \$50.00**

**Associate membership** is available to civic, religious and other non-profit organizations.

**Individual Member      \$25.00**

**Individual membership** is available to any person ("private citizen") interested in the welfare of Copiague and its Chamber

**Elected Official      \$50.00**

**Elected Official** is a "membership class" available to any elected official, at any level, who expresses an interest in the welfare of Copiague and its Chamber.

I agree, in applying for membership, to honor and be bound by the rules, purposes and By-laws of the Copiague Chamber of Commerce.

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date of Application

## Optional packages:

- Southbay's Neighbor business card ad: 3 issues for **\$150**
- Website Sponsorship: **\$225.00** for one year (must be member in good standing)

**All mail-in Applications must be accompanied by full payment.** Failure to do so will cause automatic rejection. Please return this form with your check to The Copiague Chamber of Commerce, P.O. Box 8, Copiague, NY 11726

Enclosed is my Check for \$ \_\_\_\_\_

**PLEASE FILL COMPLETELY:**

## Primary Contact Person

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_ Title: \_\_\_\_\_  
i.e. President, Marketing Manager, etc.  
Phone: \_\_\_\_\_ Direct phone number for this contact person: \_\_\_\_\_  
Email: \_\_\_\_\_ Direct email (will be kept confidential): \_\_\_\_\_

## Business Information

Business Name: \_\_\_\_\_  
Phone: \_\_\_\_\_ Customer service phone number: \_\_\_\_\_  
Email (will be displayed online): \_\_\_\_\_  
Other email address: (will not be displayed online Website): \_\_\_\_\_  
Brief Business Description:  
\_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Physical Address: \_\_\_\_\_  
(If different than mailing address)  
City: \_\_\_\_\_ State: \_\_\_\_\_ Physical Address Zip: \_\_\_\_\_

## Additional Information

I will participate in the Member-to-Member Discount Program:  Yes  No

Briefly describe the discount you will offer to other Copiague Chamber members:  
\_\_\_\_\_

- I am interested in serving on the Board of Directors.
- I am interested in serving on a committee. Please specify your interests: \_\_\_\_\_
- I will add the Copiague Chamber website link to my website