

Colorado City Area Chamber of Commerce

157 W. 2nd Street * PO Box 242

Colorado City, TX 79512

Office (325) 728-3403

chamber@cityofcoloradocity.org

www.coloradocitychamberofcommerce.com

MEMBERSHIP APPLICATION

Please Circle One:

| | | | |
|---------------------|-----------------|---------------------|-------------------|
| <i>New Business</i> | <i>Business</i> | <i>Organization</i> | <i>Individual</i> |
| \$90-first yr | \$180 | \$100 | \$60 |

I accept the Chamber's challenge to make the Colorado City, Westbrook, and Loraine areas a better place to do business and a better place to live. I subscribe \$_____ as my annual investment in this important organization.

Business Name: _____

Contact Name: _____

Mailing Address: _____

Phone #: (____) _____ Fax #: (____) _____

Email Address: _____

Signature: _____ Date: _____

Billing: Monthly_____

Semi-Annual_____

Annually_____

This part only needs to be filled out if you are doing automatic withdrawal.

Bank Name: _____

Account Number: _____

**Thank You For Supporting Your
Colorado City Area Chamber of Commerce!**