

Membership Application

Company Name:							
Owner(s) Name(s):							
Address:							
Business Phone:							
Preferred Email for receiving Communication:							
Website:							
Facebook Page:							
Instagram Page:							
Twitter:							
Linkedin:							
Tell us about your business:							
Date of Business Establishment:							
Number of Employees:							
Business Structure: Sole Proprietor Corporation Partnership							
Business Operations:Home BasedStore Front Online Other:							

Are you interested in any of the following advertising options?

- ____ Center street sign
- ____ Website Banners
- ____ Job Postings
- ____ Special Events Posting
- ____ Sponsoring Chamber Events

Do we have your permission to advertise on the LDCC Website with the information provided? ___ Yes ____ No

*Please attach a copy of your logo to this application - dimensions 800*378 pixels in .png or .jpg format. Without phone number, website or email address. Note: If you do not submit a logo a place holder will be used on the website

Are you interested in having Chambers Plan contact you about employee benefits?

Accounting Information:

Contact Name:
Contact Email:
Contact Phone Number:
Legal Company Name:
Billing Address:

UPON RECEIPT, THE LDCC BOARD WILL REVIEW YOUR APPLICATION FOR APPROVAL. ONCE YOUR MEMBERSHIP IS APPROVED YOU WILL RECEIVE A WELCOME EMAIL WHICH WILL INCLUDE INFORMATION ABBOUT YOUR MEMBERSHIP INCLUDING A COPY OF OUR BYLAWS. PAYMENT WILL ALSO DUE AT THIS TIME

Notes:	 	 	