

**HUMBOLDT CHAMBER OF COMMERCE
MEMBERSHIP FORM
2010**

Membership Name: _____

Address: _____
(P. O. Box/Street)

(City) (State) (Zip code)

Phone: _____ **Fax:** _____

Contact Person: _____

E-mail Address: _____
(IMPORTANT: You will receive chamber information and notice of monthly meetings at this address.)

Annual Membership Dues:

SPECIAL NOTICE: To encourage Membership the Chamber's Board of Directors has authorized a temporary change in the dues. You can now become obtain a 2010 membership in the Humboldt Chamber of Commerce for *half price!*

Business/Commercial Membership: \$50 – **Now only \$25.00**
Individual/Organization Membership: \$25 – **Now only \$12.50**
Please make your checks payable to **Humboldt Chamber of Commerce**

Mail this form and your check to:

**Humboldt Chamber of Commerce
ATTN: Linda Leonard, Treasurer
P. O. Box 133
Humboldt, KS 66748-0133**

PLEASE RETURN THIS COMPLETED FORM WITH YOUR MEMBERSHIP FEE.