

**HUMBOLDT CHAMBER OF COMMERCE  
2011 MEMBERSHIP FORM**

**Membership**

**Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

(P.O. Box/ Street)

\_\_\_\_\_  
(City)

(State)

(Zip)

**Phone:** \_\_\_\_\_

**Contact Person:** \_\_\_\_\_

**E-mail Address:** \_\_\_\_\_

(IMPORTANT: You will receive notification of meetings at this address.)

**Website Address:** \_\_\_\_\_

**Annual Membership Dues:**

Business/Commercial Membership: \$50

Individual/Organization Membership: \$25

Please make your checks payable to **Humboldt Chamber of Commerce**

Mail this form with membership to: Humboldt Chamber of Commerce  
Attn: Linda Leonard, Treasurer  
PO Box 133  
Humboldt, KS 66748-0133

**PLEASE RETURN THIS COMPLETED FORM WITH  
YOUR MEMBERSHIP FEE.**