

## Mercer Area Chamber of Commerce Chamber Membership Non-Profit Fiscal Year 2021-2022 (Sept. 1—Aug. 31)

Please return all completed forms and payment to the Chamber by August 27, 2021.

## **CONTACT INFORMATION**

Business Name:		
Contact Name:		
Mailing Address (Summer):		
City:	State:	ZIP:
Mailing Address (Winter):		
City:	State:	ZIP:
Physical Address of Building (including fire #):		
City:	State:	ZIP:
Phone:	Website:	
Email:		
Year business opened:	Year you attained ownership	(if different):
Member Since (Year):		
INITIAL BOX IF INFORMATION H	IAS NOT CHANGED (RETU	RNING MEMBERS ONLY)
Please submit a 40 word descrip  Your physical address, email and  Initial box to use current descrip	I phone number do not need	

You may submit a longer description of your business for the Chamber's website.

Bronze-75 words - Silver- 150 words - Gold- 200 words

## Please select one category your business best fits in.

Please number in order of importance.
ADD MAY HINE HILV ALIO OFFIT OOT NOV DEO
R APR MAY JUNE JULY AUG SEPT OCT NOV DEC
_ T W Th F S
Rate
\$75
keting, please make sure to contact them about your ad, design, and
Drive P.O. Box 10 Tomahawk, WI 54487
info@5StarUpNorth.com
nis agreement is accurate and I agree to the terms of condition
Date
d Membership Form and check to:
merce  5150N Hwy 51   Mercer, WI 54547
Date:
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