

**LAWRENCE COUNTY CHAMBER OF COMMERCE
MEMBER APPLICATION**

DIRECTORY LISTING INFORMATION

Individual Member or Business Name _____

Business Owner/Manager Name _____ Title _____

Street Address _____ City _____ State _____ Zip _____

Phone _____ Toll Free _____ Cell _____

Business Email _____ Web Address _____

Facebook _____ Twitter _____

Business Description (for category listing) _____

BILLING INFORMATION (if different from above)

Contact Name & Title _____ Email _____ Phone _____

Billing Address _____

Total number of employees (including owner) _____ Date the business was established ____/____/____

Annual Membership Based On Investment Schedule \$ _____

Voluntary Donation To Economic Development Fund \$ _____

(Used for Job Creation, Marketing, and Deal Closing Efforts)

\$ _____ Total Investment

SIGNED _____

DATED _____

If referred, please list the name of the Chamber Member _____

Check if you would like a visit in the upcoming year from a Chamber staff member

Return to:

Lawrence County Chamber of Commerce

Beth Keaton, Director of Membership

1609 North Locust Avenue, Lawrenceburg TN 38464

www.selectlawrence.com

Phone 931-762-4911