

# MEMBERSHIP APPLICATION FORM



## CAMERON CHAMBER OF COMMERCE

416 N. Walnut St., Suite A  
Cameron, MO 64429  
816-632-2005

[www.cameronmochamber.com](http://www.cameronmochamber.com)  
[cameronmochamber@gmail.com](mailto:cameronmochamber@gmail.com)

BUSINESS NAME: \_\_\_\_\_

BUSINESS CONTACT: \_\_\_\_\_

STREET ADDRESS: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

PHONE: \_\_\_\_\_ FAX: \_\_\_\_\_

E-MAIL: \_\_\_\_\_

WEBSITE: \_\_\_\_\_

# OF EMPLOYEES: \_\_\_\_\_ YEAR ORGANIZED: \_\_\_\_\_

BUSINESS DIRECTORY LISTING: \_\_\_\_\_

MEMBERSHIP INVESTMENT: \_\_\_\_\_

**Please return with payment to the Chamber Office.**

# INVOICE



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TO:

DESCRIPTION	TOTAL
MEMBERSHIP DUES	

PAYABLE TO: **CAMERON CHAMBER OF COMMERCE**

DELIVER TO: 416 N. Walnut St., Suite A, Cameron, MO  
64429

**Please keep for your records.**