



# MEMBERSHIP REGISTRATION FORM

**Return Completed Application To:**  
1177 7th St. | P.O. Box 640 Heyburn, ID 83336  
Phone: 208.679.4793 | Fax: 208.679.4794  
Email: membership@minicassiachamber.com

**Business Membership Name:** \_\_\_\_\_

**Category Listing(s):** \_\_\_\_\_

Physical Address: \_\_\_\_\_

Mailing Address (If different): \_\_\_\_\_

Billing Address (If different): \_\_\_\_\_

Business Phone #: \_\_\_\_\_ Business Fax #: \_\_\_\_\_

800 #(toll free): \_\_\_\_\_ Number of Employees: \_\_\_\_\_

**Chamber Cash Program: Yes / No**

Business Email: \_\_\_\_\_ Website: \_\_\_\_\_

Facebook: \_\_\_\_\_ Twitter: \_\_\_\_\_

Instagram: \_\_\_\_\_ Other: \_\_\_\_\_

**Business Description:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Main Contact: \_\_\_\_\_ Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Additional Contacts:

Name: \_\_\_\_\_ Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Email: \_\_\_\_\_ Phone: \_\_\_\_\_

**Date Joined:** \_\_\_\_\_ **Tier Investment:** \_\_\_\_\_ **Total: \$** \_\_\_\_\_

**Discount: (-\$** \_\_\_\_\_ **)**

*SELECT ADDITIONAL MEMBERSHIP OPPORTUNITIES ON THE BACK OF THIS PAGE.*

**\*Room to Grow Total: \$** \_\_\_\_\_

**Sub Total: \$** \_\_\_\_\_

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

This is a verbal agreement between both parties and does not have to be signed to be binding. No refunds.

The Mini-Cassia Chamber of Commerce reserves the right to cancel or interrupt any special events or programs due to weather or unforeseen circumstances. Chamber Membership programs, dues and benefits are subject to change under the direction of the Mini-Cassia Chamber Board of Directors.

**For Chamber Office Use only:**

**Billing Type:**

**Paid:** \_\_\_\_\_ **Access:** \_\_\_\_\_ **QB:** \_\_\_\_\_ **NM:** \_\_\_\_\_ **CC:** \_\_\_\_\_ **Web:** \_\_\_\_\_ **CCash:** \_\_\_\_\_