

**MEMBERSHIP DUES**

**APPLICATION**

**Business** \_\_\_\_\_ **Tel:** \_\_\_\_\_

**Mailing Address** \_\_\_\_\_

**Street Address (if different)** \_\_\_\_\_

**Phone Number** \_\_\_\_\_ **Email** \_\_\_\_\_

**Web Address** \_\_\_\_\_

**Classification (from schedule)** \_\_\_\_\_

**Number of Employees** \_\_\_\_\_

**Hours of Operation** \_\_\_\_\_

**Dues Amount (from schedule)** \$ \_\_\_\_\_

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

**Title (owner; manager; etc.)**

**Return to: Sherry Woodard, Exec. V.P.  
Silsbee Chamber of Commerce  
835 Highway 96 South  
Silsbee, Texas 77656**

**THANK YOU!**