

Chamber Of Commerce Application:

Moss Landing Chamber of Commerce

Business Membership

Fee: One Business Listing for \$60.00

Name: _____

Address: _____

City: _____ St: _____ Zip: _____

Phone: _____ FAX: _____

Email: _____ Website: _____

Business License or Resale Number: _____

Brief Description of Business: _____

Please indicate category for business (**circle one**):

Accommodations - Restaurants – Galleries - Services – Recreation

Marine – Graphics & Design - Agriculture

Committees you could volunteer for:

Public Relations, Fund Raising, Beautification, Social Events,

Membership, Street Fair, Finance

Did someone recommend you? If yes, who: _____

Please make check payable to **Moss Landing Chamber of Commerce** for \$60.00

The board considers all memberships:

Your Signature: _____ DATE: _____

Mail to:

Moss Landing Chamber of Commerce

P.O. Box 41

Moss Landing, CA 95039

Thank you, Moss Landing Chamber of Commerce.