MEMBERSHIP FORM

Date	Referred by	
	Toll-Free Number	
Fax		
Email		
Year Business Started	<u> </u>	
Please describe the nature of your business for the Chamber website (200 characters max):		
Number of Employees Full Time	Part Time	
Number of Motel/Hotel/Resort Units		
Banks: Deposits (millions)		
Number of Licensed Professionals		
Number of Licensed Hospital / Nursing Home Bed	S	
Membership investment amount \$		
Membership remains in effect until terminated by you or for <i>non-payment</i> of dues.		
Please list email addresses of employees you would like included on the E-blast list. (i.e. CEO, president, administrative assistant, marketing, front office staff, etc.)		
MEMBERSHIP CONTACT AUTHORIZATION		
	oute contact information on mailing lists or labels to non-members?	
YES NO	-	
Signature		
Date		



704 6th Ave North, Suite B Virginia, MN 55792

218.741.2717

4 218.749.4913

www.LaurentianChamber.org

INVESTMENT SCHEDULE

NUMBER OF EMPLOYEES	ANNUAL Investment
1-5	\$230
6-20	\$342
21-35	\$464
36-50	\$587
51-Plus	\$587 plus
51-Plus	\$6 each
	additional
	employee

- Part time and seasonal employees count as a one-half employee (i.e. 2 part-time or seasonal employees = 1 employee)
- Non-profit/Government organization's dues are one-half

SPECIFIC BUSINESS CLASSIFICATIONS

FINANCIAL INSTITUTIONS

DEPOSITS IN MILLIONS	
1-20	\$367
20-30	\$581
30-40	
40-50	\$1,010
50-60	\$1,224
60-Plus	
	' '

Engineering, Law Firms, Medical Clinics, CPAs, Dental, Architectural, Veterinary, Physical/ Occupational Therapy

\$260 first professional, \$40 each additional professional

ANNUAL

Hotel \$260 first 10 units, \$7 per additional unit

Mining \$1,200

Out of town (locations 50 miles or more from the LC office \$265

Associate \$158 Home-based \$158

DBA's or Multiple Businesses One third parent company