



903 East Broadway, Goldendale, WA 98620

Phone: 509.773.3400 Fax: 509.773.3411

info@goldendalechamber.org [www.goldendalechamber.org](http://www.goldendalechamber.org)

**Type of Membership** (please select one)

<b>Business</b>	<b>Associate Business</b>	<b>Non-Profit Organization</b>

**MEMBER INFORMATION**

<b>Business Name</b>			
<b>Owner/Individual</b>			
<b>Mailing Address:</b>			
	<b>City:</b>	<b>State:</b>	<b>Zip:</b>
<b>Business Address:</b>			
	<b>City:</b>	<b>State:</b>	<b>Zip:</b>
<b>Business Phone:</b>	<b>Cell:</b>	<b>Fax:</b>	
<b>Website:</b>			
<b>Business Email:</b>			
<b>Contact Email:</b>			

This email will be used ONLY for Chamber Communications and will not be shared.

**BUSINESS INFORMATION**

<b>Number of Employees:</b>	<b>Full-time</b>	<b>Part-time</b>
<b>Designated Voting Member:</b>		

**Other representatives that may participate in Chamber activities:**

**I affirm that:**

- My information is true and correct as of the date of this application
- I support the objectives, purposes and programs of the Goldendale Chamber of Commerce
- Designated voting member may be changed by the Owner or Chief Executive Officer of the business. Please notify us in writing or by electronic mail of the change.
- I may resign my membership by written notice

Applicant Signature

Date

	Date	Date	Date	Date	Date	Date	Date
Excel							
Package							
Ck Number							

Input by

Date



---

**Tell us about your business for the Business  
Directory on [goldendalechamber.org](http://goldendalechamber.org)**

---

**Member to Member Discounts/Offerings:**

---

**Hours of Operation:**

---

**Products / Services Your Business Offers:**

---

*Please be sure that the Chamber has your Logo on file for use within your business directory listing. This file should be a jpeg or png file and can be emailed or delivered by USB drive. Email to [phyllis@goldendalechamber.org](mailto:phyllis@goldendalechamber.org).*