

Black Earth Area Chamber of Commerce

New Member Application

Business Name _____
Contact Person _____
Address _____
Phone number _____
Fax number _____
Email address _____
Website _____
Other _____

Please give a 20-25 word description about your business:

Signature

Date

Go to our Website www.blackearth.org. If you have a preference, please indicate which category(s) you want your business to be listed under.

Return this form along with your chamber dues of \$100 to:

**Black Earth Area Chamber of Commerce
PO Box 65
Black Earth, WI 53515**