



Niagara USA Chamber of Commerce
 Niagara USA Chamber
 6311 Inducon Corporate Drive
 Sanborn, NY 14132
 (716) 285- 9144 Fax (716) 285-0941

MEMBERSHIP APPLICATION

MEMBER INVESTMENT INFORMATION:

Businesses 1-10 Employees.....\$225

11+ add \$3 per full-time employee*

Hotel & Motels \$250 One representative is included with each membership, plus \$2 per room.

(Restaurants can be added for \$100 Associate Member fee)

Not-for-Profit Corporations ... \$180

Banks, Utilities, Colleges/Universities, Media, Health Care FacilitiesNEGOTIATED RATE

Additional Business Membership... \$100

Individuals whose primary business is an **Active Member** may enroll an additional wholly-owned business for an annual fee of \$100 per business; one representative included with membership.

SPONSOR OPPORTUNITIES AVAILABLE - Inquire

Associate Canadian Membership...\$75

(See attached application)

We are required by law to inform you that, for Income tax purposes, your membership dues are a necessary business expense, not a charitable contribution. Membership in the Niagara USA Chamber is on an annual basis and will automatically be renewed unless a written cancellation at least 30 days prior to the renewal date is received. Renewal dates are 12 months from the month the member joins. A PAC contribution is no longer deductible as a business expense. All political contributions are individually accounted for and are subject to the provision of the New York State Election Code.

Annual Investment: _____

New Member Processing Fee (\$20): _____

Associate Additional Membership (\$100): _____

Canadian Associate Membership (\$75): _____

Voluntary PAC* (\$75) _____

**The Committee for a Better Niagara is a political action committee (PAC) and exists as a separate entity organized to assist governmental officials in their endeavors as they relate to the legislative agenda. Donation to the PAC is voluntary.*

TOTAL Member Amount: \$ _____

PAYMENT (Please check one):

Cash Check (#) _____

Visa Mastercard

Card #: _____

Exp. Date: _____ CVV# _____

Signature: _____

Company Name: _____

Category of Business: _____

Street Address: _____

Business Mailing Address: _____

City/ State/ Zip: _____

Phone: _____ Cell: _____

Website Address: _____

Primary Contact: _____

Title: _____

E-mail Address: _____

MWBE Certified: Yes No

Number of Full Time Employees: _____ Part-time: _____

(Every two part-timers equals one full-time employee)

Additional Representatives	Phone	Email
_____	_____	_____
_____	_____	_____

Brief paragraph about your business:

Years in Business: _____

Referred by: _____

Authorized Signature: _____

Date: _____

Mission Statement:

"The Niagara USA Chamber is to lead with a single voice to advance economic development, promote commerce and tourism, provide value-added services to members, advocate for business, and by these actions, improve the quality of life for the Niagara region."