



**NOME CHAMBER OF COMMERCE
MEMBERSHIP APPLICATION
PO Box 250 Nome AK 99762
907-443-3879**

Please complete the following application to renew or begin your Nome Chamber of Commerce Membership- Please Print Legible

_____	_____	_____
Company/Organization/Church Name	Representative	Title
_____	_____	
Business License #	# of Full Time Employees	
_____	_____	
Mailing Address	City	State Zip
_____	_____	_____
Physical Address	Company Phone	Company Fax
_____	_____	_____
E-mail Address (Website & Directory listings will not provide email addresses)	Website Address	

Business Description (Please be clear as this will be the description listed (25-50 words):		

- Membership Type: _____ Business – for profit business in Nome or surrounding area
 _____ Associate – for profit business not operating in Nome or surrounding area
 _____ Supporting – nonprofit organization
 _____ Church
 _____ Affiliate Business – ½ Membership Fee of First Business (use additional sheet for additional business information please)

Business Class Membership

Full Time Employees	1	2-4	5-15	16-30	31-50	51-100	100 +
Membership Fee	\$75	\$125	\$150	\$200	\$300	\$350	\$400

Associate/Supporting Class Membership

Full Time Employees	1-20	21-49	50 +	Churches
Membership Fee	75	125	200	50

Payment Rec'd. _____	Ck # _____	Date _____	
Chamber Card issued _____	Card # _____	Date _____	Initials _____
Web Listing Added _____		Date _____	Initials _____
Added to Mailing List/Chamber Directory _____		Date _____	Initials _____

**Please mail to: Nome Chamber of Commerce, PO Box 250, Nome AK 99762 - OR -
Drop off at the Chamber Office – Post Office Building Front Street**