#  Membership Application,

# membership $175.00 Company Name

(Exact company name needed for publication purpose)

Address

City Postal Code

Telephone Fax

Email (Please see NOTE below)

Web Site

Year Established # of Employees

Contact Name & Title 1.

Products/Services

Company Profile:
In 25 words or less, describe your business (Used for all publication purposes)

##### Payment: Please make cheque payable to “Uxbridge Chamber of Commerce”OR “E-Transfer to info@uxcc.ca”

Amount enclosed (membership fees are non-refundable)

Payment of dues must accompany application.

Signed Date: Mailing Address: “Mailing address Uxbridge Chamber of Commerce
 2 Campbell Drive, Suite 810
 Uxbridge, Ontario L9P 0A3 or email this Word doc to: info@uxcc.ca

NOTE: The Uxbridge Chamber of Commerce regularly disseminates information, such as meeting dates, notice of the Annual General Meeting and topics of interest, to the membership in several ways, including via our web site, mail and phone. To streamline and simplify this dissemination of information, we would prefer to have contact with you via email.

**If we have your permission to send email to you, please initial HERE**