

Springhill-North Webster Chamber of Commerce

400 North Giles Street
Springhill, Louisiana 71075
Phone 318 539-4717
Fax 318 539-2500

Email: chamberc@cmaaccess.com

Membership Application & Investment Statement

Firm Name _____

Contact Person _____

Mailing Address _____

Physical Address _____

Phone _____

Cell _____

Fax _____

Email _____

Web Site _____

Business Classification _____

Business Size _____

Billing cycle preferred:

Semi Annually _____ Annually _____

The undersigned hereby subscribes and promises to pay
Springhill-North Webster Chamber of Commerce the sum of \$ _____ per year.

Firm representative _____ Date _____

Signature _____