



***YES! I would like to join in this partnership to support commerce and growth in Conover and the surrounding area.***

## MEMBERSHIP APPLICATION

Effective July 1, 2023 to June 30, 2024

- ☐ Standard Business Membership-\$160
- ☐ Associate/Non-Business Membership-\$25 per household
- ☐ Non-Profit Organization-\$30

Check the appropriate box above for your business. Include check payable to Conover Chamber of Commerce and mail to the address at the bottom of the page.

<b>PUBLISHED INFO</b>	Business Name: Physical Address: City: _____ State: _____ Zip: _____ Phone: _____ Email: _____ Website: _____ Facebook: Y / N (please circle)
<b>CONTACT INFO</b>	Owner/Primary Contact: Mailing Address: City: _____ State: _____ Zip: _____ Phone: _____ Email: _____

Referred by: \_\_\_\_\_

Our website will feature up to 6 photos with your business listing, contact info and map location. Please provide a description (up to 100 words) for each appropriate category (Lodging, Food/Spirits, Entertainment, Business, etc.) that personalizes your listing message and highlights the unique features our visitors may enjoy at your business or lodging location. Photos, logos (JPG or PNG format preferred) and copy may be emailed to [conover.org@gmail.com](mailto:conover.org@gmail.com). Provide additional commentary here:

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“Working Together for Conover”-Our maximum effectiveness is powered by strength in memberships. We offer a referral incentive of \$25 off your following year's Business membership rate when you refer someone who becomes a new Business member (not to exceed your membership rate)

Referred business: \_\_\_\_\_

Contact name & info: \_\_\_\_\_

(CCOC office use only)																			
Date	____	/	____	/	____	Check #	_____	QB	____	MS	____	CC	____	W	____	FML	____	TY	____

Conover Chamber of Commerce, PO Box 32, Conover, WI 54519

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  [conover.org](http://conover.org)