



MOKENA

CHAMBER OF COMMERCE

Creating Community Connections

2020 MEMBERSHIP APPLICATION

Chamber Membership is the Smartest Business Investment you can make

Business Name _____

Contact Name _____ Title _____

Business Phone _____ Cell Phone _____

E-mail _____ Website _____
(Please include e-mail address to receive weekly Chamber updates)

Address _____ City _____ State _____ Zip: _____

Mailing Address _____ City _____ State _____ Zip: _____
*ONLY IF DIFFERENT THAN PHYSICAL ADDRESS

Referred By _____

DESCRIPTION OF BUSINESS (will be posted on Chamber website):

Signature _____ Date _____

MEMBERSHIP TYPES

Regular Membership	\$195.00	\$ _____
Home-Based Business	\$90.00	\$ _____
Civic / Non-Profit	\$90.00	\$ _____

- I WOULD LIKE A RIBBON CUTTING CEREMONY AT MY NEW BUSINESS
- I WOULD LIKE TO HOST A BUSINESS AFTER HOURS AT MY BUSINESS
- I WOULD LIKE TO BE INVOLVED ON A CHAMBER COMMITTEE

PLEASE RETURN FORM AND PAYMENT TO:
Mokena Chamber of Commerce, 11104 Front Street, #1B, Mokena, IL 60448
708-479-2468 (p) · 708-479-7144 (f) · chamber@mokena.com · mokena.com

Membership Fee Payment: Please submit FULL payment with application. Payment is non-refundable.

Amount Due \$ _____ Check enclosed

Credit Card Number: _____ Exp. Date: ____/____ Security Code: _____

Billing Zip Code: _____ **Payment is non-refundable*