

Belle Plaine Chamber of Commerce Membership Form

Date

Business Name

Contact Name

Address

Phone Number

Fax Number

Email Address

Web Site

Payment:

_____ \$ 200 Business Membership

_____ \$50 Retired/Individual Membership

_____ \$ 100 Home Business

Remit Payment To:

Belle Plaine Chamber of Commerce
204 North Meridian
Belle Plaine, MN 56011

Additional Information for the Business Directory
(Description of service offered, Business hours etc.)

