



CLARENDON HILLS CHAMBER OF COMMERCE
P.O. BOX 75
CLARENDON HILLS, IL 60514
(630) 323-8700

MEMBERSHIP SCHEDULE

CHAMBER MEMBER

- Category 1 - \$250 A business with 10 or more permanent employees or self employed professionals (i.e., banks, realtors, newspapers, retail stores, factories)
- Category 2 - \$150 Same as Category 1 with 4 to 9 employees
- Category 3 - \$100 Same as Category 1 with 1 to 3 employees (two part-time employees equal one full time employee)

ASSOCIATE CHAMBER MEMBER

- \$50 Retired business owners and other residents or non-residents with vested interest in the community

HONORARY CHAMBER MEMBER

Non-dues paying, non-voting member of the Chamber, upon a two-thirds vote of the executive board

**CLARENDON HILLS CHAMBER OF COMMERCE
MEMBERSHIP PLEDGE**

Date _____

The undersigned hereby unites with others in our community in underwriting an adequate budget for the Chamber of Commerce, and agrees to pay the sum \$ _____ as their share of the cost of maintaining the Chamber's program.

This annual membership investment covers the period from February 1, _____ to January 31, _____

Business Name: _____

Signed by: _____

Please PRINT the following information:

Contact Person: _____

Business Name: _____

Address: _____ Phone: _____

Email Address: _____

Please remit white copy with payment by February 15th to:
Clarendon Hills Chamber of Commerce • P.O. Box 75 • Clarendon Hills, Illinois 60514

white copy - Chamber / yellow copy - Member