



Membership Application

2016

Please complete all the information below (this information is used to keep our records current and some of the information will be posted on our website - www.badaxemich.com). Please include your e-mail address so that we may keep you informed and updated. Please contact Mark Lundquist at mrlundquist@gmail.com or 989.269.6369 with questions or comments. Please return this page with your dues.

Business Name: _____

Primary Representative: _____ Title: _____

E-mail Address of Primary Representative: _____

Business Address: _____

Type of Business: _____ Website: _____

Number of Employees: _____ Phone: _____

Please Select Membership Level:

\$150.00 Corporation / Business / Sole Proprietor

\$75.00 Civic Organization / Non-Profit Organization / Religious Organization

Total Remittance - 2015 Membership:

Checks Payable To: Bad Axe Chamber of Commerce, P.O. Box 87, Bad Axe, MI, 48413

Please indicate your interest in the following activities:

(This is a great opportunity for employees of your company to participate and represent your business!)

Hatchet Festival Administrative Professionals Luncheon Host Networking Event

Christmas Parade Website / Newsletter Business Expo Fundraising

Sponsorship Marketing