



POLISH AMERICAN CHAMBER OF COMMERCE
Membership Application

5214 W. Lawrence Ave., Suite No. 1, Chicago, IL 60630 tel./fax 773.205.1998 www.polishamericanchamber.org

Type of Membership Date
First Time Applicant Referred by..... Membership Renewal

Company Information

Company Name

Type of Company or Operation for Inclusion on Chamber's Website
.....
.....

Address

Federal Employer ID No Year Company Established

Phone Fax

E-mail Web site

Primary Contact

Primary contact's name

Home Address

Home or Cell Phone

Membership Dues

(4% fee will be added to payments by credit card)

.....Individual \$200 Corporate \$500 Gold \$1,000 Platinum \$3,000

.....Student \$25

Applicant's signature.....

Payment: Check enclosed Visa MasterCard American Express

No.: _____ - _____ - _____ - _____ Exp. Date: ____ / ____ CCV#: _____ Zip Code: _____

Name on card: _____

Signature

Date