



**Renewal for Membership
Application for Membership 2010**

Please Check One:

- Business Membership
- Individual Membership

Please Check One:

- Renewal
- New Membership

Business Name _____
 Contact Name _____
 Business Address _____
 City _____ State _____ Zip Code _____
 Business Phone _____ Business Fax _____
 Business Email Address _____

All meeting notices and other correspondence will be sent via email. Please provide an email address you use regularly. Add members@hfmchamber.org to your safe list.

If you do not have email you can access all chamber events online at www.hfmchamber.org.

Email _____

Description of your business for Business Directory (i.e. services provided, products, etc. up to **seven words**):

Each member will be listed under one category:

Please choose **ONE** from the back of the form:

Dues: Please complete the application and return it to the address below with your membership fee. Dues are **\$75.00 annually**. Make your check payable to the Honeoye Falls/Mendon Chamber of Commerce.

Please retain a copy of this form as your receipt.

Please mail check & application to:

Honeoye Falls Mendon Chamber of Commerce
 P.O. Box 526
 Honeoye Falls, NY 14472-0526

Phone: (585)-234-2755 (voicemail)

Email: members@hfmchamber.org

Please mark with a ✓ the committee(s) that you will be interested in helping with:

- Board of Directors Fundraising Other (please specify)
- Membership Special Events _____
- Programming Mendon Merchant Association