



PO Box 588
Unit J 591 Wallace St
Hope BC V0X 1L0
1-604-249-1246

Membership Application 2017-2018

Business or Individual Name: _____

Primary Business Contact: _____

Street Address: _____

Mailing Address: _____ (if different than street address)

Telephone:(____) ____ -- _____ E-mail: _____

Preferred Contact Method: Snail Mail E-mail

Website Address: _____

Nature of Business: _____

Brief Explanation of the business activities: _____

2017-2018 Membership Fees

Non-profit / Not-For-Profit organizations \$75.00

Commercial / Business \$150.00

Fees Due = _____ Payment Date: _____ Cash: Cheque:

Return your application by:

Mail: PO Box 588 Hope BC V0X 1L0, or

Drop off: Hope Chamber of Commerce Office, Unit J 591 Wallace St, Hope BC

Please note that by completing and submitting this membership application you agree to abide by the terms, conditions, and policies of the Hope & District Chamber of Commerce.