



ANDROSCOGGIN VALLEY CHAMBER OF COMMERCE MEMBERSHIP APPLICATION

We invite you to join the Androscoggin Valley Chamber of Commerce. Your views, opinions, and concerns are important to us and are important in order to reach the goals of the Androscoggin Valley Chamber of Commerce. Your help in achieving our goals of unity, promotion, and assistance is critical in improving the health of the business community and the living environment.

Your investment in the Chamber of Commerce may be tax deductible as a legitimate business expense (not as a charity). Memberships are issued to individual businesses and may not be shared. The goal of the Chamber of Commerce is to promote business in our region.

Business Information:

Business Name: _____

Street Address: _____

City/State/Zip: _____

Mailing Address: _____

City/State/Zip: _____

Primary Phone: _____ Secondary Phone: _____

Email: _____ Website: _____

Business Owner: _____ Manager or Contact: _____

Please describe your business:

Membership Rates:

Section A: Base Rate (Full Year)

- Seasonal, Cost: \$175.00
- General / Other, Cost: \$175.00
- Financial Institution, No Cost
- Non-Profit Organization (100% Charitable), Cost: \$150.00
- Individual Membership (No Business Affiliation), Cost: \$40.00
- Affiliate Member (Having a Parent Company), Cost: \$25.00

Section B: Full Time Equivalent (FTE) Adjustment

\$ 6.00 per FTE. Note: two part-time employees = one FTE.

(Does not apply to Individual Membership, Financial Institution, or Seasonal member classes; nor to the special classes below)

Number of FTE's: _____

Sub-Total \$ _____

Section C: Special Class Adjustments (in lieu of FTE Adjustment above):

- Accommodation (\$3 per lodging unit)

Number of Lodging Units: _____

Total: (units x \$3) _____

- Restaurant (\$1 per seat)

Number of Seat: _____

Total: (seats x \$1) _____

- Financial Institution (\$23 per million dollars in deposits)

Number of million dollars in deposits: _____

Total: (# of million x \$23) _____

Total Annual Membership Investment (A + B + C) \$ _____

- I agree to support the Androscoggin Valley Chamber of Commerce in its endeavors.
- I understand that dues must be paid each year by the due date in order to receive all membership benefits and that my membership is subject to approval by the Board of Directors.
- I have read and agree to Membership Terms and Code of Ethics.

Signature: _____

Payment Options:

- Pay by Visa or Mastercard

Card Number: _____ CVC: _____ Exp. Date: _____

Name on Card: _____

- Pay by Check

Make check payable to Androscoggin Valley Chamber of Commerce and mail to: 961 Main Street, Berlin, NH 03570.

Androscoggin Valley Chamber of Commerce Gift Certificate Program

The Gift Certificate Program's purpose is to bolster the economy within the North Country and Great North Woods communities. Chamber Gift Certificates are purchased by businesses, community organizations, and residents as awards for performance, significant contributions, or gifts for special occasions. Approximately \$20,000 in Chamber Gift Certificates will be sold this year to local businesses, organizations, and residents – keeping revenue earned with our local businesses!

How the program works:

- Chamber Gift Certificates are sold ONLY at the Chamber office and is currently accepted at over 40 participating member businesses.
- A list of all participating members is distributed with each Gift Certificate sold.
- When the certificate is redeemed, it is treated as cash, with cash given as change if needed. Once redeemed, the business then returns the certificate to the Chamber office and is reimbursed for its full value.
- Chamber Gift Certificates are used in place of cash and can be made out for any amount up to \$25. Keep in mind when choosing the amount of the gift certificate that each gift certificate must be used at a single business (they cannot use a portion at one business and the balance at another business).

- YES!** Please enroll our business in the Androscoggin Valley Chamber of Commerce Gift Certificate Program.
- Not at this time.
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Membership Terms

“Member” refers to the business. “Delegate” refers to the person representing the business. Each member must specify a delegate or contact person.

A. Members of the Chamber must agree to and abide by the following Code of Ethics:

- Each business must display, or have on record a State of New Hampshire Business License, if applicable; Rooms & Meals tax number & Federal ID.
- Each member's primary goal must be honesty in all transactions, eliminating frauds and deceptions from the marketplace.
- Each member must make every effort to honor product and service warranties, guarantees, and service commitments.
- Each member must strive to protect the health and rights of the consumer. Specifically the right to safety, to be heard, to choose, to be informed, and the right to quality and integrity in the marketplace.

B. Any member may be dropped or suspended by the Board of Directors for non-payment of dues, or breach of the codes of ethics.

C. In the event a business changes hands, the membership fee paid carries forward to the new ownership.

D. Membership dues shall be determined by the Membership Committee based on the Executive Committee recommendations and approved by the Board of Directors.

E. Each member shall have one vote at the Annual Meeting, or by a proxy mail vote.

F. A delegate in good standing may request a position on any standing committee subject to the approval of the committee chairperson, or may be considered for nomination to the Board.

The fiscal year of the Chamber will be January 1 through December 31. The Membership year begins January 1 and ends December 31 of each year; however, membership will be pro-rated to reflect a half-year membership for those joining after July 1.