



**Fairmont Chamber of Commerce
Application for Membership**

Business/Individual Name _____

Mailing Address _____

City _____ State _____ Zip _____

Location Address _____

Contact Person _____

Business Phone _____

Fax Number _____

Email Address _____

Website _____

The Chamber welcomes your interests and ideas. Please share with us how you feel the Chamber may best work together to meet the business needs of the community.

Membership Dues are \$65 for businesses and \$40 for individuals/couples.
Please attach dues with application and return to:

**Fairmont Chamber of Commerce
P.O. Box 214
Fairmont, North Carolina 28340
910-770-1967**