

## **GOWANDA AREA**

CHAMBER OF COMMERCE P.O. Box 45, Gowanda, NY 14070

E-Mail: gowandachamber@yahoo.com

## Membership Application

Business Name		
Number of Employees	Date of Applica	tion
Mailing Address		
Physical Address		
Contact Person		Title
Phone	Cell	Fax
E-mail	Web Site _	
Preferred method of co	ommunication	
Date/year business ope	ened	
(Waived for ne	w businesses)	Individual Member Dues \$50.00
C A	Chamban of Camana	D.O. Davi 4E. Carranada, NV 44070

Gowanda Area Chamber of Commerce, P.O. Box 45, Gowanda, NY 14070

Are you interested in serving as a volunteer on a Chamber committee this year? Yes No

Please provide a brief description of your business for us to include on our web site. If you have brochures available please forward to us. We receive requests for information so please include any details, for example if you have a conference room available for use and cost, if any. Thank you for your time and consideration.

Board of Directors: Nicholas Crassi, Jr. President, Irene Jimerson Vice President, Becky Grudzien Secretary, Mary Stelley Treasurer, Gary Patterson, Immediate Past President, Ned Divine, Robert Dingman, Carol Sheibley, Shannon Smuda, Melinda Spire