



Ortonville Area Chamber of Commerce
P.O. Box 152, Ortonville, MI 48462
(248) 627-8079 www.ortonvillechamber.com

MEMBERSHIP APPLICATION

Applicant Name: _____

Title: _____

Name of company: _____

Address: _____

Type of business: _____

Business phone: _____

Business fax: _____

E-mail address: _____

Web site: <http://www>. _____

Home phone: _____

Date: _____ Signature: _____

If membership includes additional employees please contact Jennifer at the Chamber office.

Membership dues are \$150.00 Please enclose check for dues made payable to the Greater Ortonville Chamber of Commerce with application.

On which committee would you like to serve? (Please check all that apply)

- Fireworks*
- Septemberfest*
- Christmas in the Village*
- Membership*
- Poker Party*
- M-15 Heritage Route*
- Business Expo*
- Other*_____



Name Badge Order Form

Name of Chamber Company: _____

Member Name on Badge (optional): _____

Pick one;
Pin / Magnetic

Please make checks payable to the Greater Ortonville Chamber of Commerce.