



Application for Membership

Date: _____

New Member: Please fill out and return to the Chamber office at 1330 Hwy 61, Two Harbors, MN 55616. ***Make checks payable to: Two Harbors Area Chamber of Commerce.***

NAME OF BUSINESS: _____

ADDRESS: _____

PHONE: _____ FAX NUMBER: _____

CONTACT PERSON: _____

EMAIL: _____

(If you don't have a web page, would you like your email listed in the directory of the Chamber Web Page: yes ___No___)

WEB ADDRESS: _____

CELLULAR PHONE: _____

BOARD MINUTES CAN BE E-MAILED TO YOU _____ (check here if yes)

CATEGORY _____ (see list attached)

Options available with your membership: (Please refer to the last page of the member packet for complete Membership options).

- Description of business on website \$25 _____
- Photo of business on website \$25 _____
- 2nd category listing in the directory \$25 _____
- Brochure placement at Lester River \$195 _____

AMOUNT ENCLOSED: _____

Under Federal Tax Regulations, Membership Investments cannot be deducted from Federal Income Tax as a charitable contribution; however, other tax deductions may be applicable.



Two Harbors Area
CHAMBER OF COMMERCE

1330 Hwy 61, Two Harbors, MN 55616
218.834.2600 • fax: 218.834.4012

www.twoharborschamber.com • email: thchamber@twoharborschamber.com

Serving the communities of Knife River, Beaver Bay, Silver Bay, Finland and Isabella