



CHAMBER of COMMERCE

DISTINCT BY DESIGN

The city that bricked the world

MEMBERSHIP APPLICATION

Date: _____

Business Name: _____

Business Type: _____

Business Address: _____

Business Phone: _____

Business Email: _____

What products or services does your business offer: _____

Applicant Information:

Name: _____

Position at Business: _____

Cell Phone: _____

Personal Email: _____

Reason for wanting to join the Ferris Chamber of Commerce: _____

Mail completed application and appropriate fee to:
Ferris Chamber of Commerce, PO Box 45, Ferris, Texas 75125

Yearly Membership Fees:

Membership fees are due annually on or before April 30th.

Pop-Up Vendor \$35

Associate Membership (No Voting Rights): \$50

Civic Organizations, Churches and/or non-Profits: \$50

Home Based, Family-Owned Business (2-7 Employees): \$75

Business (8-15 Employees): \$150

Business (16-30 Employees): \$250

Business (31 or more Employees): \$500

NOTE: Please email **business website** address, **Facebook** address, **social media** information, and **Logo** to:

Kay Huff at yalltexans@yahoo.com