

**TOMBSTONE CHAMBER OF COMMERCE  
MEMBERSHIP APPLICATION**

*If you are applying for membership for the first time, please fill out this form completely. If you are renewing your membership enter any change of information.*

**\*I. Type of Membership.** Place an "X" next to the category that best describes your membership level.

- |   |  |
|---|--|
| <input type="checkbox"/> Associate (Individual/non-business)<br>(\$50 annual Fee)<br><input type="checkbox"/> Small (up to 2 employees)<br>(\$110 annual fee)<br><input type="checkbox"/> Medium (3-6 employees)<br>(\$192.50 annual fee) | <input type="checkbox"/> Large or Multiple (7 or more emps.)<br>(\$275 annual fee)<br><input type="checkbox"/> Outside of Tombstone<br>(\$110 annual fee)<br><input type="checkbox"/> Non-profit Organization<br>(\$55 annual fee) |
|---|--|

**II. Business Information.** Please fill out completely

Company Name: \_\_\_\_\_  
 Business License number \_\_\_\_\_  
 Business Physical Address: \_\_\_\_\_  
 Company mailing Address: \_\_\_\_\_  
 Company Phone: *Include area code, extension and any toll-free numbers.* \_\_\_\_\_  
 \_\_\_\_\_  
 Company fax: \_\_\_\_\_ Company E-mail: \_\_\_\_\_  
 Company Web Site: \_\_\_\_\_  
*Help us refer customers to your business! Please provide a brief description of the services or products you offer in 25 words or less. Please do not include business hours. Please provide us with your business cards and brochures*  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**III. Business Classifications:** (After main classification, there will be a \$5 fee for each additional classification for those wishing to be maintained in several categories on the web site.)\***The \$5 fee will also be assessed at renewal.**

- |   |  |   |  |
|---|--|---|--|
| <input type="checkbox"/> Antiques         | <input type="checkbox"/> Apartments              | <input type="checkbox"/> Art Galleries              | <input type="checkbox"/> Associate members |
| <input type="checkbox"/> Attractions      | <input type="checkbox"/> Book/Dealers            | <input type="checkbox"/> Clothing                   | <input type="checkbox"/> Craftsmen         |
| <input type="checkbox"/> Florists/Flowers | <input type="checkbox"/> Foundations             | <input type="checkbox"/> Gift Shops                 | <input type="checkbox"/> Golf              |
| <input type="checkbox"/> Guest Ranch      | <input type="checkbox"/> Guns                    | <input type="checkbox"/> Jewelry                    | <input type="checkbox"/> Lodging           |
| <input type="checkbox"/> Museums          | <input type="checkbox"/> Organizations           | <input type="checkbox"/> Photography                | <input type="checkbox"/> Place of Worship  |
| <input type="checkbox"/> Publications     | <input type="checkbox"/> Real Estate             | <input type="checkbox"/> Reenactment group          | <input type="checkbox"/> Rental Property   |
| <input type="checkbox"/> Places to Eat    | <input type="checkbox"/> R.V. parks              | <input type="checkbox"/> Saloons/Bars               | <input type="checkbox"/> Services          |
| <input type="checkbox"/> Sports           | <input type="checkbox"/> Tours/Tour Guides       | <input type="checkbox"/> Trail Rides/Horse Boarding |  |
| <input type="checkbox"/> Weddings         | <input type="checkbox"/> Other (please describe) |   |  |

**Owner/Primary Contact Person Information.** (One name only, please. This information is not provided to the public.)

First and last name: \_\_\_\_\_  
 Title: Owner/Manager \_\_\_\_\_  
 Home phone: \_\_\_\_\_

**V. Please Sign and Date.**

\_\_\_\_\_  
Signature
Date