

2025 Membership Application

Organization Name: _____

Type of Business: _____

Contact Person(s): _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Business Phone: _____ Fax: _____

Email for Chamber Correspondence: _____

General Website: _____

General E-Mail: _____

*Membership is Based on Number of Full Time Employees.
Two Part Time Employees = One Full Time Employee*

Investment Level	Annual	Semi-Annual
1-7 FTE Employees	\$165.00	\$82.50
8-15 FTE Employees	\$310.00	\$155.50
16-50 FTE Employees	\$515.00	\$257.50
51 or more Employees	\$620.00	\$310.50
Associate - Individual Person	\$105.00	\$52.50
Non-Profit	\$105.00	\$52.50

I prefer to pay dues: Annually _____ Semi-Annually _____ Paid Online _____

Total Number of Employees _____ Amount Enclosed: \$ _____

*Preferred payment is Annual. If you choose Semi-Annual, please send in the first payment amount and you will automatically be invoiced for the next payment. *Associate Membership is Non-Voting.*

*Please feel free to pre-pay your meeting lunch meals: Yearly Cost is \$120.00
MEETING MEALS PAYMENT ENCLOSED: \$ _____*

Please make checks payable and mail to:

Buckhannon-Upshur Chamber of Commerce
14 East Main Street • Buckhannon, WV 26201