

**APPLICATION FOR INVESTMENT  
CLARKSVILLE LAKE COUNTRY CHAMBER OF COMMERCE**

105 2<sup>nd</sup> Street / P.O. Box 1017  
Clarksville, VA 23927  
Phone: 434-374-2436 Fax: 434-374-8174  
Email: membership@clarksvilleva.com  
Website: www.clarksvilleva.com

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YES! I WANT TO HELP, PROTECT AND PROMOTE THE FUTURE OF MY BUSINESS IN CLARKSVILLE

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Name of Firm: \_\_\_\_\_

Name of Owner: \_\_\_\_\_

Name to Appear in Directory: Yes \_\_\_\_\_ No \_\_\_\_\_

Title of Local Contact: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

2<sup>nd</sup> Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Business Phone: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Fax Number: \_\_\_\_\_ Email Address: \_\_\_\_\_  
(Please be sure this is correct regarding upper and lower case, etc.)

Web Site Address (URL): http://\_\_\_\_\_

Location of Firm: \_\_\_\_\_

Age of Firm/Business: \_\_\_\_\_

Years: \_\_\_\_\_ No. of Employees: \_\_\_\_\_  
(Note: 2 part-time employees = 1 employee)

Type of Business: (Category for Membership Brochure): \_\_\_\_\_

Every attempt will be made to place your business in the category you desire. However, on some instances, categories are combined to make the directory more readable. Please note: above firm name, owner, mailing address, telephone, fax and email information will be used for the Membership Directory. If mailing address is different from location address – location address will be included as well. If you desire anything different in the Directory, please use the space below.

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**Annual Investment**

Please remit annual investment according to the following schedule:

Business with 1 to 35 Employees -----	\$175.00
Business with over 35 Employees -----	\$350.00
Financial or Manufacturing Institutions-----	\$350.00
Associate Member -----	\$ 60.00

Please renew my Chamber membership – my investment for \_\_\_\_\_ is \$ \_\_\_\_\_  
(Year)

Note for Federal tax purposes, investment payment is tax deductible as an ordinary and necessary business expense.