

2024 Lancaster Chamber Membership AgreementPlease note that your Membership in the Lancaster Chamber is limited to the company listed below and is non-refundable and

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		Instagram@	
	l istrator (These individuals can see a ons, contact data, etc. They are also able	all information under your organization's accour to pay invoices.)	nt. This includes dues invoices and
	Contact (please select one person):		
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*Billing Company			
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There are other opportunities to invest at a higher level to support the Chamber mission regardless of employee size. Please reach out to us at twallace@lancasterchamber.com for more information on the Partner level (\$5,000-\$10,000), the Chairman's Circle level (\$15,000+), or how to be a Benefactor.

Company Interests for Chamber Engageme Check as many as you would like. What would you like to learn					
 □ Diversity, Equity & Inclusion (DE&I) □ Women in Business Programming (WIB) □ Young Professionals Network (YPN) □ Impact & Advocacy □ Events & Programs □ Sponsorships & Advertising □ Professional Development □ Networking □ Small Business □ Resources & Information □ Value-Add/Cost-Saving Programs 	 ☐ Stories & News ☐ Human Resources (HR)/Administrative ☐ Operations ☐ Information Technology (IT) ☐ Sales/Development ☐ Marketing & Sales ☐ Finance ☐ Executive Leadership ☐ Legislative/Government ☐ Nonprofit 				
Cost Savings Interest: We offer a variety of cost-savings and value-add programs. Ple	rase check all that you might be interested in below!				
☐ BizSure Business Insurance☐ Fleet Fueling Program☐ Natural Gas Savings Program	☐ Grudi Advantage: Telecom & IT Program☐ Electricity Procurement Program				
Payment Details: \$35 One-time New Member Processing Fee. Additional amount added to the initial payment. □ Choose this box if check is enclosed (make payable to Lancaster Chamber) Choose this box if you'd like to charge a card (and fill out information below)					
Please Charge: □ Visa □ MasterCar	'				
□ *If you require an invoice, please email twallace@lancasterchamber.com* Name on Card:					
Amount:	Expiration Date: CVC Code:				
Zip Code:					
Cardholder's Signature: I recognize that our investment in Membership at the Lancaster Chamber demonstrates our commitment to the Chamber's work impacting business success and our county's prosperity.					
Signature:	Date:				
Thank You for Supporting the Lancaster (Ninety percent of your investment may be deduction business expense. The non-deductible portion all	tible for income tax purposes as ordinary and necessary				
Reach Out to Us:	to us so we can help you and your business				
We welcome your questions! Please reach out to us so we can help you and your business.					
Business Development Team Phone: 717.391.3531					
Email: sales@lancasterchamber.com Address: 115 E King Street, Lancaster, PA 17602 Fax:					

717.293.3159