

Greater Ardmore Chamber of Commerce

26461 1st Street
Ardmore Alabama 35739
256-423-6177
yeubanks@greaterardmorechamber.com

CHURCH MEMBERSHIP APPLICATION

PLEASE PRINT

Date: _____

Name of Church: _____

Contact / Appointed
Chamber Representative: _____

(Individual will be person responsible for communicating Chamber information
to Church members and Representing Church at Chamber Meetings.)

Physical Address of Church: _____

City	State	Zip
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Mailing Address of Church _____
(if different than physical address)

City	State	Zip
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Church Phone: _____

Representative's Cell Phone: _____

Representative's E-Mail Address: _____

Church Web Site: _____

Membership: \$100.00 Annually

Make checks payable to the **Greater Ardmore Chamber of Commerce**