



Bayport-Blue Point Chamber of Commerce
2017-2018 MEMBERSHIP APPLICATION

P.O. Box 201 Bayport, NY 11705

www.bayportbluepoint.com

We ask all current and new members to complete this annually so that we may update our Chamber website with your information.

Please return your check, payable to the BBP Chamber of Commerce, (or visit bayportbluepoint.com to pay by PAYPAL) along with this completed application. Thank you!

Annual membership dues are only \$150.

Business Name: _____

Owner's Name _____

Business Address _____

Telephone number: _____

Cell Phone: _____

Fax: _____

Alternate Emergency Phone #: _____

Email Address (print clearly) _____

Your business website (print clearly) _____

What year did your business begin: _____

Number of employees: _____

A short description of your business (50 words or less... Used in search so use key words) Please write clearly or email me description (agcprinting@yahoo.com) Also send us a picture to use. REMEMBER >>> THE SEARCH FUNCTION ON THEWEBSITE IS DRIVEN BY THE INFORMATION YOU GIVE ON THIS FORM. _____

IMPORTANT

Please pay by check or go to bayportbluepoint.com to pay by PAYPAL.

