

## Dues Schedule

Associate (employed with member or retired) .....	\$37
Individual (No business owner or professional) .....	\$95
Civic Organization/ Church or School .....	\$140
Out of Town Business .....	\$180

### **Retail/Wholesale/Distributor/Manufacturing**

Less than 3 employees .....	\$195
3-15 employees .....	\$265
16-50 employees .....	\$375
51-100 employees .....	\$495
101-200 employees .....	\$600
201-300 employees .....	\$645

(Call Chamber for dues amount if over 300 employees)

### **Motels/Hotels and Condos**

30 units or less .....	\$265
31-120 units .....	\$375
Over 120 units .....	\$495

### **Professionals (Attorneys, Doctors, etc.)**

Less than 3 employees .....	\$195
3-10 employees .....	\$265
11 or more employees .....	\$375

(Add \$50 for each additional professional)

### **Restaurants**

Seats up to 100 customers .....	\$265
Seats 101 + .....	\$375

Businesses under the following classifications should call the Chamber office to determine their dues amount.

Apartment Complexes	Colleges/Universities
Residential Developments	Shopping Centers
Supermarkets	Media
Convenience Stores	Financial Institutions
Discount/Department Stores	Utilities
Public Institutions	Unclassified businesses

Note: Count both full-time and part time employees. Two part time employees equal one full time employee.

***Not all rates provided due to space limitations.***

Please do not hesitate to call  
(910)892-4113  
if you have a question concerning your dues.



The undersigned hereby subscribes and promises to pay annually \$ \_\_\_\_\_ to the Dunn Area Chamber of Commerce, Inc. This agreement replaces all membership subscriptions of prior date and will be continuous until written resignation has been presented to the Board of Directors.

***Thank You for Your Investment!***

Firm \_\_\_\_\_

Chamber Contact \_\_\_\_\_

Billing Contact \_\_\_\_\_

Street Address \_\_\_\_\_

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

City/St/Zip \_\_\_\_\_

Phone \_\_\_\_\_ Alt. Phone \_\_\_\_\_

FAX \_\_\_\_\_ EMAIL \_\_\_\_\_

WEB \_\_\_\_\_

Business Classification \_\_\_\_\_

# of Employees: Full Time: \_\_\_\_\_ Part Time: \_\_\_\_\_

Hours of Operation: \_\_\_\_\_

Please give a complete description of the products and/or services offered by your business

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_