



# LANGDON

Langdon & District Chamber of Commerce

## Membership Application

Company Name: \_\_\_\_\_

Owner(s) Name(s): \_\_\_\_\_

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

\_\_\_\_\_

Business Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_

Website: \_\_\_\_\_

Facebook Page: \_\_\_\_\_

Instagram Page: \_\_\_\_\_

Twitter: \_\_\_\_\_

Tell us about your business: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**UPON RECEIPT, THE LDCC BOARD WILL REVIEW YOUR APPLICATION FOR APPROVAL. ONCE YOUR MEMBERSHIP IS APPROVED YOU WILL RECEIVE A WELCOME EMAIL WHICH WILL INCLUDE INFORMATION ABOUT YOUR MEMBERSHIP INCLUDING A COPY OF OUR BYLAWS.**