SLATON
CHAMBER OF COMMERCE

Application for Business Membership

Businesses with 5 or fewer employees - $150

Businesses with 6 or more employees - $250

Date Joined: _____

Ribbon Cutting Date (if applicable): _____

Business Name:_____

Business Physical Address: _____

City/State/Zip: _____

Business Mailing Address: _____

City/State/Zip: _____

Business Phone: _____Business Fax: _____

Email: _____ Website: _____

Contact Person: _____

Your annual membership dues will be $_____

Please Mail your APPLICATION AND PAYMENT to:

Slaton Chamber of Commerce

PO Box 400

Slaton Texas 79364