

Lordsburg Hidalgo County
Chamber Of Commerce Membership Application Form
Please call chamber for rates and other information

Date: _____

Business Or Organization

Name_____

Contact Person_____

Mailing Address_____

Location_____

Phone_____

Fax_____

E Mail_____

I hereby apply for membership in the Lordsburg Hidalgo County Chamber of Commerce, agreeing that my annual donation will be \$_____, payable on an _____ annual, _____ semi-annual, or _____ quarterly basis.

Signature_____ Date_____

Ribbon cutting/ground breaking: (Requires 5 working days to set up)

I would like more information or would like to set up: Ribbon Cutting_____

Ground Breaking_____

Date_____ Received\$_____ Cash/Check#_____

Chamber personal signature_____

Please mail back to
Lordsburg Hidalgo County Chamber of Commerce 206 Main St, Lordsburg, NM 88045

