



New Membership/Renewal Application

Please return completed form with payment to
P.O. Box 877, Peotone, IL 60468

Phone: (708) 258-9450 Fax: (708) 258-0011
www.peotonechamber.com • peotonechamber@gmail.com

Business Name: _____

Business Address: _____

City: _____ **Zip Code:** _____

Mailing Address: _____
(If different from Business Address)

City: _____ **Zip Code:** _____

Phone Number: _____ **Fax Number:** _____

Cell Number: _____ **E-mail address:** _____

Website: _____

Primary Representative/Title: _____

Address: _____

City: _____ **Zip Code:** _____

Phone Number: _____ **Fax Number:** _____

Cell Number: _____ **E-mail address:** _____

Membership Category:

- _____ Active - \$150 (All for-profit enterprises)
- _____ Associate - \$75 (Not-for-profit organizations, churches, civic orgs.)
- _____ Honorary Member - \$50 (Community members)
- _____ Governmental - \$0 (Taxing bodies within the Village of Peotone)

*Make Checks payable to Peotone Chamber of Commerce

Business Category: _____

Business Description: _____

Please email a jpeg of your business logo to the Chamber.
We are more than happy to add it to your business listing on our website.

The Peotone Chamber of Commerce is dedicated to be the primary resource helping business and the community grow and prosper.