

Application for Membership Bernardsville Chamber of Commerce

PLEASE PRINT

P.O. Box 672, Bernardsville, New Jersey 07924
Tel: 908-766-9900; Fax: 908-766-6055; Website: bvillechamber.com
Annual Dues \$200.00

Business Name: _____ Date: _____

Address: _____ City: _____

Customer Contact: _____

of Employees: _____ Customer Tel #: _____ Business Hours: _____

Contact and Tel # for Chamber of Commerce matters (if different): _____

E-mail: _____ Website: _____

Business/Service Overview for Shopper's Guide and Chamber website. (Limit yourself to 50 words, but do use up to that limit.):

Please check one Business Category:

Apparel/Footware : ____ Art/Antiques/Consignments: ____ Automotive: ____

Bank/Financial/Investment/Insurance: ____ Books/Publications: ____ Florist: ____

Food/Beverage/Restaurant/Catering: ____ Gifts/Specialty Shop: ____

Health/Fitness/Beauty Salon/Barber Shop: ____

Interior Design/Home Furnishings: ____ Jewelry: ____ Lodging/Country Club: ____

Medical/Legal: ____ Non-Profit: ____ Professional/Business Services: ____ Real Estate: ____

Other (please fill in category): _____

Kindly email application, your business logo and, if possible, a photo of your shop exterior to:
klajterman@bvillechamber.com.

Please send your check in the amount of: \$200.00

To: Bernardsville Chamber of Commerce

P.O. Box 672

Bernardsville, New Jersey 07924

Please Note: Acceptance for membership is subject to approval by the Chamber Board. Political organizations and other Chambers of Commerce may not be accepted as members.

For additional information, please call Eileen Loughnane, President, at 908-642-8369 or Karen Lajterman, Administrator, at 908-766-9900.