

MEMBERSHIP APPLICATION



Sabine Parish Chamber of Commerce
1125 W. Mississippi Ave Suite F
Many, Louisiana 71449

(318) 256-3523

E-Mail – spchamber@cp-tel.net Website – www.sabineparishchamber.com Like us on Facebook.

Date of Application ____/____/____

Company Name _____

Contact Person _____

Physical Address: (Street) _____

(City) _____ (State) ____ (Zip) _____

Mailing Address: (Street) _____

(City) _____ (State) ____ (Zip) _____

Phone (Office) (____) _____ - _____ (Cell) (____) _____ - _____

E-Mail Address _____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

Website: _____

Facebook page: _____

Number of People employed by company _____ Date company started ____/____/____

Brief Description of company, its products, and services _____

Annual Membership Dues \$ _____

Please make check payable to
Sabine Parish Chamber of Commerce

Thank you for considering joining the Sabine Parish Chamber of Commerce! We are delighted that you want to make a difference in Sabine Parish. On Behalf of the entire Board of Directors, we are looking forward to working with you and your ideas. If we can be of any help, please do not hesitate to call us.