



# Kennebunk – Kennebunkport – Arundel CHAMBER OF COMMERCE Membership Application

THE CHAMBER  
KENNEBUNK-KENNEBUNKPORT  
ARUNDEL

Date: \_\_\_\_\_

Name of Business: \_\_\_\_\_

Physical Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Mailing Address (if different): \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Business Phone: \_\_\_\_\_ Fax Number: \_\_\_\_\_

Email: \_\_\_\_\_

Website: \_\_\_\_\_

Business Description (15 words or less): \_\_\_\_\_

\_\_\_\_\_

Social media outlets your business is on (circle if relevant):

facebook

twitter

Instagram

Pinterest

LinkedIn

Permission to share photos from your social media sites (Y/N): \_\_\_\_\_

Primary Contact: \_\_\_\_\_ Title: \_\_\_\_\_

Email: \_\_\_\_\_

Additional Contact: \_\_\_\_\_ Title: \_\_\_\_\_

Email: \_\_\_\_\_

*\*Please note that all employees can sign up for the weekly newsletter at [www.GoKennebunks.com](http://www.GoKennebunks.com)*

**Billing Contact (if different from primary)**

Title: \_\_\_\_\_ Email: \_\_\_\_\_

Phone: \_\_\_\_\_

I submit my application for full Chamber membership with all rights, privileges and benefits. I attest the above information is correct, and by signing this document, I understand that Chamber membership is continuous year to year and renews annually.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_



Kennebunk – Kennebunkport – Arundel  
**CHAMBER OF COMMERCE**  
 Annual Membership Dues

**THE CHAMBER**  
 KENNEBUNK-KENNEBUNKPORT  
 ARUNDEL

<b>Business</b> (any business other than categories below)	\$295
<b>Professional Services</b>	\$395
<b>Hospitality</b>	
<b>Accommodations</b>	
Cottages, Vacation Rentals, Campgrounds	\$395
B&B's, Inns (up to 20 rooms)	\$495
Hotels, Motels, Lodges, Inns (21-75 rooms)	\$795
Resorts (75+ rooms)	\$1,395
Accommodations with Dining (up to 100 seats, add these dues)	\$195
Accommodations with Dining (over 100 seats, add these dues)	\$295
<b>Dining</b>	
Coffee Shops, Bakeries, Sandwich Shops	\$325
Restaurants, Diners (up to 15 seats)	\$325
Restaurants, Diners (16 to 100 seats)	\$525
Restaurants (100+ seats)	\$625
<b>Hospitals, Colleges, Universities</b>	\$525
<b>Industrial, Commerce Parks, Auto Dealers</b>	\$525
<b>Banks</b>	\$825
<b>Non Profits</b>	\$175
<b>Artists (individual, home-based)</b>	\$175
<b>Home-based / Mobile Businesses</b>	\$175
<b>Friend of the Chamber</b>	\$50

**TOTAL ANNUAL MEMBERSHIP DUES:** \$ \_\_\_\_\_

**Payment Options (please check)**

Full       Bi-Annual       Quarterly       Monthly

**Payment Method (please check)**

Check: Please make checks payable to KKA Chamber of Commerce

Credit: A \$5 administration fee is assessed, per transaction unless paid in full

Card Number: \_\_\_\_\_ Exp. Date \_\_\_\_\_ CVV \_\_\_\_\_

Billing Address: \_\_\_\_\_

Billing City: \_\_\_\_\_ Billing State: \_\_\_\_\_ Billing Zip \_\_\_\_\_