



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 – to be used in Go Kennebunks guidebook): _____

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*

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
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Business (any business other than categories below)	\$295
Professional Services	\$395
Hospitality	
Accommodations	
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
Dining	
Coffee Shops, Bakeries, Sandwich Shops	\$325
Restaurants, Diners (up to 15 seats)	\$325
Restaurants, Diners (16 to 100 seats)	\$525
Restaurants (100+ seats)	\$625
Hospitals, Colleges, Universities	\$525
Industrial, Commerce Parks, Auto Dealers	\$525
Banks	\$825
Non Profits	\$175
Artists (individual, home-based)	\$175
Home-based / Mobile Businesses	\$175
Friend of the Chamber	\$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 _____