



East Hants and Districts Chamber of Commerce

Unit 13 – 8 Old Enfield Road
Enfield, NS B2T 1C9

Phone 902-883-1010 Fax: 902-883-7862

Email: info@ehcc.ca Website: www.ehcc.ca

APPLICATION FOR MEMBERSHIP

Business Name: _____

Contact Person(s): _____

Mailing Address: _____

City: _____ Postal Code: _____

Office Phone: _____ Office Fax: _____

E-mail: _____

Website: _____

Is the above the information you wish to be displayed in our **website** member directory? YES NO

If NO, please indicate any changes for your directory listing: _____

Nature of Business: _____

Membership Fee Schedule			
	Dues	15% HST	Total
<input type="checkbox"/> Sole Proprietor	76.00	11.40	\$ 87.40
<input type="checkbox"/> 2-5 employees	114.00	17.10	\$131.10
<input type="checkbox"/> 6-10 employees	152.00	22.80	\$174.80
<input type="checkbox"/> 11-25 employees	190.00	28.50	\$218.50
<input type="checkbox"/> 26-50 employees	228.00	34.20	\$262.20
<input type="checkbox"/> 51+ employees	266.00	39.90	\$305.90
<input type="checkbox"/> Individual	44.50	6.68	\$ 51.18
<input type="checkbox"/> Non-Profit	44.50	6.68	\$ 51.18
<input type="checkbox"/> Government	152.00	22.80	\$174.80

Chambers of Commerce Group Insurance Plan[®] members must register for the same number of employees as their insurance plan.
 All memberships are for a 12-month period and will be renewed on an anniversary-date basis.

Cheque enclosed, payable to:
East Hants and Districts Chamber of Commerce
Unit 13 – 8 Old Enfield Road
Enfield, NS B2T 1C9

VISA or MasterCard

Card # _____

Exp. date ___/___/___ Signature _____

Do you require a receipt? YES NO

Please indicate if you will be offering any discounts or benefits to other **EHDCC** members.

YES, discount/benefit offered: _____

Please let us know how you heard about our Chamber and were prompted to join:

- another Chamber member
- EHDCC website
- other: _____
- Chambers of Commerce Group Insurance Plan[®]
- TD Merchant Services/First Data

Signature: _____ Date: _____