



To become a Member of the Paris & District Chamber of Commerce, complete the fields below, all fields with a * are required. Once complete, submit form via mail or email as per the contact information at the bottom of this form.

* Main Contact Person: _____

* Company / Business Name: _____

* Phone Number: _____

Fax Number: _____

* Email Address: _____

* Address: _____

City: _____ Province: _____ Postal Code: _____

this address is a mailing address only, do NOT use on the interactive map of members on the website.

Website URL: _____

LinkedIn: _____

Facebook: _____

Twitter: _____

Instagram: _____

YouTube: _____

* Please provide a brief description of what your business offers:

* How did you hear about us? / Who referred you? _____

* How many employees does your business currently have? _____

* Membership Levels *membership fees are subject to H.S.T.*

- | | |
|---|---|
| <input type="checkbox"/> Standard Membership Package - \$200/year | <input type="checkbox"/> Bronze Membership Package - \$500/year |
| <input type="checkbox"/> Non-Profit Membership Package - \$100/year | <input type="checkbox"/> Silver Membership Package - \$700/year |
| <input type="checkbox"/> Retired Professional - \$100/year | <input type="checkbox"/> Gold Membership Package - \$1000/year |

	Standard Membership Package	Non-Profit Membership Package	Retired Professional Membership Package	BRONZE Membership Package	SILVER Membership Package	GOLD Membership Package
Chamber Membership	✓	✓	✓	✓	✓	✓
Advertisement in the Chamber Chatter				✓	✓	✓
Company Profile and/or Promotions in New Member Package				✓	✓	✓
Chamber to Promote and Forward Company Job Postings				✓	✓	✓
Chamber to Like and Share Company Social Media Posts				✓	✓	✓
Chamber Website Logo Representation					✓	✓
Add Company Events to Chamber Website Calendar					✓	✓
Company Logo Representation on Running Banner					✓	✓
Company Logo Included in any Chamber Digital Presentations					✓	✓
Two Tickets to AGM					✓	✓
Company Logo Representation at all Chamber Events						✓
Company Logo Included in any Chamber Promotional Material						✓
	\$200 / year	\$100 / year	\$100 / year	\$500 / year	\$700 / year	\$1000 / year

Billing and Payment Details

Membership dues are invoiced annually in November and payment is due by the 15th of January. If joining mid-year dues will be pro-rated based on the membership level and number of months remaining in the year.

Payment Options *select one*

- | | | | |
|--|-------------------------------------|--|---------------------------------|
| <input type="checkbox"/> pre-authorized payment *MUST complete Pre-Authorized Payment Authorization section* | <input type="checkbox"/> e-transfer | <input type="checkbox"/> credit card *subject to a 3% processing fee | <input type="checkbox"/> cheque |
|--|-------------------------------------|--|---------------------------------|

Pre-Authorized Payment Authorization *IMPORTANT: attach a personalized VOID cheque*

- I wish to pay by Pre-Authorized Payment and hereby authorize the PARIS & DISTRICT CHAMBER OF COMMERCE to debit the bank account identified on this form to pay membership dues for the amount stipulated on the annual invoice provided.

Financial Institution Name: _____

Branch Transit Number: _____ Institution Code: _____ Account Number: _____

Member Authorization and Agreement

You, the Payor, may revoke your authorization at any time subject to providing verbal /written notice to the Paris & District Chamber of Commerce at least 10 business days prior to your next scheduled Pre- Authorized Payment due date. You are required to notify the Paris & District Chamber of Commerce immediately of any changes with respect to the banking account against which it has a designated Pre-Authorized Payment Agreement to be withdrawn. You have certain recourse rights if any debit does not comply with this agreement. For example, you have the right to receive reimbursement for any debit that is not authorized or is not consistent with this Pre-Authorized Payment Agreement. To obtain more information, please contact your financial institution or visit the Canadian Payment Association at: www.cdnpay.ca.

Member Signature: _____ Date: _____

*I agree that by submitting this form I give Paris & District Chamber of Commerce permission to publish my business name and contact information on the Chamber website.

Please Note: The Paris & District Chamber of Commerce reserves the right to use any photograph/video taken at any Chamber event without written permission of those included within the photograph/video. The Paris and District Chamber of Commerce may use the photograph/video in various publications including but not limited to newsletters and brochures, and on websites and social media. Images will not be identified using full names or personal identifying information without approval from the photographed subject, parent, or legal guardian.