



Membership Application/Contract

Business Name _____

Business Type _____

Contact _____

Address _____

Business Mailing Address _____

Business Phone (for publishing) _____

Contact phone (if different than business) _____

Email _____

Website _____

DUES: \$75 Non-profits, individuals

\$100 Small businesses, attractions, and all other categories

Membership Category _____ Dues Amount _____

The undersigned, acting as a representative for said business, agrees to automatically renew membership in Explore Schuylkill unless our office is notified in writing at least **30 days** prior to the **member's Anniversary date**.

Signature _____ Date _____