



**NELSONVILLE AREA
CHAMBER of COMMERCE**

P.O. Box 276

Nelsonville, Ohio 45764

740 753 4346 www.nelsonvillechamber.com

2008

**Nelsonville Area Chamber of Commerce
Business Profile Application**

Name of Business _____

Contact Person _____

Street Address _____

Mailing Address _____

City _____ **State** _____ **Zip** _____

Email _____ **Website** _____

Would you like your email listed in the Membership Directory? Yes ___ No ___

Would you like your website listed in the Membership Directory? Yes ___ No ___

Phone _____

Fax _____ **Would you like fax listed in directory?** Yes ___ No ___

Type of Business _____

Number of Employees/Members _____

Membership in Other Organizations _____

Comments _____

Are you interested in working on a Committee, Event or project? Yes ___ No ___

TOTAL DUE _____

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