

LEGAL & DISTRICT CHAMBER OF COMMERCE
BOX 338, LEGAL ALBERTA T0G 1L0
www.legalchamberofcommerce.com

Membership Application Form

Business Name _____

Contact _____ **Position** _____

Mailing Address _____

Phone _____ **Fax** _____

E-Mail _____

Number of Employee's _____
(full-time equivalents)

Membership Rates:

Associate/Individual **\$30.00**

Below 2 Employees **\$30.00**

3 or more employees **\$60.00**