

Manawa Area Chamber of Commerce
PO Box 221
Manawa, WI 54949
920-596-2495
manawachamberofcommerce@gmail.com
www.manawachamber.org

2016 Chamber Membership Annual Dues. \$100.00 due January 31, 2016.

New Member _____

Submit payment to : Manawa Chamber
PO Box 221
Manawa, WI 54949

Renewal Member _____

******Please fill out this form and return it with payment.******

Business Name: _____

Street Address: _____

Mailing Address (if different from above): _____

Phone: _____ Fax: _____

Website / Facebook: _____

Business email: _____

Contact person: _____

Contact person email (if different from business email): _____

Would you like your meeting notices sent to you by: email _____ phone _____ text _____ (cell # _____)

Do you want to offer discounts to Chamber members: Yes _____ No _____

Discount: _____

Signature: _____ Date: _____

Website Information: The Manawa Area Chamber website is www.manawachamber.org. Chamber members will have their information displayed on the website along with photos and promotions.

Please give a small description about your business to place on the website. Or any changes to be updated on the website. _____

Would you like to include your logo? Yes _____ No _____

Would you like to include a picture of your business? Yes _____ No _____

Cont. on back

Email your logo and picture to manawachamberofcommerce@gmail.com. We can also come and take a picture of your business if you do not have one.

Do you need us to take a picture of your business? Yes _____ No _____

Informational Display Case: We currently have a display at the City Hall with Chamber member's information. We need business cards, flyers, brochures, coupons, etc. to display and also send out in mailings to visitors requesting Manawa information.

Do you have information to be displayed or mailed? Yes _____ No _____

Chamber Key Tag Program: This is a program that started in 2012 that will allow Chamber or non-Chamber businesses to offer special discounts to people who obtain a key tag. It is a tool to retain business to Manawa at no cost to you. As a participant in the program, you will select the offer you would like to make. We encourage creativity when developing your discount and suggest that you provide consumers a "special benefit" that is not available through any other offer. If you are not able to offer the same continuous benefit you have the option of rotating discounts.

Are you interested in participating in the Chamber Key Tag Program: Yes _____ No _____

_____ Our business wishes to continue participating the Manawa Chamber Key Tag Program with the current offer.

_____ Our business wishes to continue participating in the Manawa Chamber Key Tag Program by offering a revised discount from the one we are currently offering. Please make revisions above.

_____ Our business wishes to participate in the Key Tag Program by offering a rotating discount.

- Discount offered: 10% _____ 15% _____ 20% _____ 25% _____ Other _____
- Buy 1, Get 1 free (higher price prevails) _____ Buy 1, Get 1 half price (higher price prevails) _____
- Free _____ with purchase totaling \$ _____ or more.
- Other Special Offer:

Would you like to distribute key tags to customers at your business? Yes _____ No _____

I agree to participate in the Manawa Chamber Key Tag Program offered through the Manawa Area Chamber of Commerce and to honor the discount(s) on all products and services purchased by any consumer. I agree to notify all appropriate personnel in my business, at all locations, to ensure that our employees will honor the discount(s) listed above. A written notice must be given by either party in order to cancel the discount. This offer is open to all Manawa Area Businesses.

Signature: _____ Date: _____

