



LABRADOR NORTH CHAMBER OF COMMERCE

MEMBERSHIP APPLICATION

Contact Name: _____

Company: _____

No. of Employees: 1-2 (\$110 + HST) 3-5 (\$155 + HST) 6-10 (\$200 + HST)

11-24 (\$245 + HST) 25+ (\$290 + HST)

Address: _____

Telephone: _____ Fax: _____

E-mail: _____

Website: _____

Signature: _____ Date: _____

For more information, please contact our office at the number or address below.

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