

Galesville Area Chamber of Commerce

PO Box 196, Galesville, Wisconsin 54630

Individual Membership Application/Renewal

Member Information

(Corrections, if needed)

Name	_____	_____
Mailing Address	_____	_____
City, State Zip	_____	_____
Email Address	_____	_____
Phone	_____	_____
Fax	_____	_____

Individual Membership Dues

(This category is for persons not engaged in business activities.)

Individual Membership \$40

Membership Dues Paid _____

*Please make checks payable to: Galesville Area Chamber of Commerce
and mail to PO Box 196, Galesville, WI 54630-0196.*