

# 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

**Total Membership Dues Paid** \_\_\_\_\_

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