

**Withlacoochee Gulf Area
Chamber of Commerce**

P.O. Box 427

Inglis, FL 34449

Phone: 351-447-3383

Email: inglisyankeetown@gmail.com

Website: inglisyankeewchamber.com

Membership Application

Your Name: _____

Business Name: _____

Type of Business: _____

Mailing Address: _____

ZIP

Physical Address: _____

(if different than above)

ZIP

Business Owner: _____

Contact Person: _____ Phone: _____

(if different than above)

Email: _____

Website: www._____

Facebook: _____

Annual Dues: *(Please check one)*

Business Membership (including directory listing and direct link to your website) - \$100/yr

Associate Membership (Individual/Non-Business Owner) - \$25/yr

Please make checks payable to Withlacoochee Gulf Area Chamber of Commerce

Date Paid: _____