



Chamber of Commerce of
Washington Heights and Inwood, Inc.

751 West 183rd Street
New York, NY 100033
212 928-6595
www.wahichamber.org

Membership Form

Date: _____

I hereby apply for membership in the Chamber of Commerce of Washington Heights and Inwood.

Business Name: _____ **Nature of Business:** _____

Street: _____

City: _____ State: _____ Zip: _____

Business Phone: _____ Fax: _____

Web Address: _____ Business E-Mail: _____

Primary Contact:

Name: _____ Title: _____ E-Mail: _____

Office Phone: _____ Cell Phone: _____

Send Invoice to:

Name: _____ Title: _____

Invoice Address (if different than above): _____

Enrollment Date: _____ Membership Fee: \$ _____

Please attach your check to this form and return to the address above. Dues are tax deductible.
The Chamber is a not-for-profit corporation.