



Polish American Chamber of Commerce - Michigan

APPLICATION FOR MEMBERSHIP

Circle the appropriate type of membership you are applying for:

Charter Member \$500

Regular Member \$200

Individual Member \$50

Company Information

Company Name: _____

Position/Title: _____

Company Street Address: _____

City/State/Zip Code: _____

Company Phone: _____

Company Fax: _____

Company E-mail: _____

Company Web site: _____

Personal Information

First Name: _____

Last Name: _____

City/State/Zip Code: _____

Phone: _____

Fax: _____

E-mail: _____

Web site: _____

Applicant's Signature and Date: _____

Mail application and remittance to:
Polish American Chamber of Commerce Michigan
5817 Glen Eagles Dr., West Bloomfield, MI 48323
Phone: (248) 619-5645
Email: paccmichigan@gmail.com
Website: <http://www.paccmichigan.org>