

# Membership Application

One Massey Avenue, PO Box 1441, Chautauqua, NY 14722 Phone: 716-357-4569

NEW MEMBER

CURRENT MEMBER

Business Name: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Business Address: \_\_\_\_\_

Mailing Address if Different: \_\_\_\_\_

Email: \_\_\_\_\_

Website: \_\_\_\_\_

Phone: \_\_\_\_\_

Fax: \_\_\_\_\_

Website listing description (if new member or providing changes):

**\*\*Please send pictures for listing to Scott at [Communications@tourchautauqua.com](mailto:Communications@tourchautauqua.com)\*\***

**For Credit/Debit Card - Please Complete this Section: Cost is \$100**

Visa     Mastercard     Discover     Amex

Card# \_\_\_\_\_

Exp. Date \_\_\_\_/\_\_\_\_ Amount \$ \_\_\_\_\_

Name on Card \_\_\_\_\_

Billing address (if different) \_\_\_\_\_

Make Checks Payable to: CCVB, One Massey Ave, P.O. Box 1441, Chautauqua, NY 14722