



Data Collection/Verification Form (PLEASE COMPLETE)

Directory Listing:	
Company Name:	
Primary Published Contact:	
Address:	
Phone:	
Fax:	
Company's Email:	
Company's Website:	
# Full Time Employees: _____	# Part Time Employees: _____
<input type="checkbox"/> Check here if your company is a non-profit organization.	
Primary Business Category:	
Note: To view our complete list of categories, visit www.poconochamber.org . Categories must be chosen from this list. Your first (primary) category is free with membership; additional categories cost \$75 each. Please list or verify additional categories in the field below! Additional Category: (\$75 each, call for details.)	
* Marketing Contact:	
* Accounting Contact:	
** Company Facebook	
** Company Instagram	
** Company Twitter	

Please list any additional details about your company or listing: _____

Help us ensure the accuracy of your information by completing this form and mailing it to The Chamber address listed above. **Please return this form ASAP to ensure that your company's information is updated for the annual printed Membership Directory.** To verify that your information has been received and updated, visit www.PoconoChamber.org to view your organization's profile. Verification form updates generally take 2 – 4 weeks to process.

Name (printed): _____

Signature: _____

Date: _____

**Please Return Completed Forms to:
1004 W Main St. Stroudsburg, PA 18360 or eblose@poconochamber.org**