

# Update Membership Profile



Please update your information if necessary, to help us keep our database current.

Business Name: \_\_\_\_\_  
Main Contact: Name: \_\_\_\_\_ E-Mail: \_\_\_\_\_  
Website: \_\_\_\_\_ Phone: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
Billing Address (if different): \_\_\_\_\_  
Number of Employees: Full Time: \_\_\_\_\_ Part Time: \_\_\_\_\_  
How would you like to receive you invoices?  Mail  Electronically- Via Email  
Email Address where you would like to receive invoices: \_\_\_\_\_

**Business Establishment Year** (the year that your business was founded): \_\_\_\_\_

\*The Chamber will use this information to determine when your business is eligible for a service award at the Annual Chamber Awards Banquet.

## Related Individuals:

The name, phone number, and email address of individuals within your organization that you would like to receive Chamber information or updates. It is very important that we have the correct contact information for at least the primary contact on the account. Please feel free to add more than 4 individuals.

Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
Email: \_\_\_\_\_ Title: \_\_\_\_\_

Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
Email: \_\_\_\_\_ Title: \_\_\_\_\_

## Chamber Gift Check Program

The Chamber's Gift Check program is available to all Chamber members as a benefit of your membership. These Gift Checks are redeemable at local businesses including restaurants, specialty shops, and so much more, while keeping your hard-earned dollars in our local economy! These make perfect gifts for Birthdays, Anniversaries, Holidays, Employee Appreciation, or any special occasion.

**\*\*\*PLEASE SEE BACK FOR MORE INFORMATION\*\*\***

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## Benefits in Participating:

- It's good for our Chamber as we are able to offer an additional benefit at no charge to our members while promoting the local community.
- It's good for our members as they take advantage of a free benefit that is designed to drive traffic through member's doors as a result of our promotion and advertising of the program.
- It is great for our community, as this program promotes shopping local!

- Yes, I **would** like to participate in the Chamber Gift Check Program, and I have read and received a copy of the Chamber Gift Check Program guidelines.
- No, I **would not** like to participate in the Chamber Gift Check Program.

You will remain a participant of the Chamber Gift Check Program as long as you are a current chamber member or until we receive in writing to remove your business/organization from the program. As a participant, you have the right to refuse any Chamber Gift Check that looks to be altered or copied. Program terms and conditions are subject to change.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## Media Release Form

I, \_\_\_\_\_, grant permission to Defiance Area Chamber of Commerce, hereinafter known as the "Media" to use my image (photographs and/or video) for use in Media publications including:  
(Check All That Apply)

- |  |   |
|--|---|
| <input type="checkbox"/> Videos                | <input type="checkbox"/> General Publications |
| <input type="checkbox"/> Email Blasts          | <input type="checkbox"/> Website              |
| <input type="checkbox"/> Reoccurring Brochures | <input type="checkbox"/> Social Media         |
| <input type="checkbox"/> Newsletters           | <input type="checkbox"/> Other: _____         |
| <input type="checkbox"/> Magazines             |   |

I hereby waive any right to inspect or approve the finished photographs or electronic matter that may be used in conjunction with them now or in the future, whether that use is known to me or unknown, and I waive any right to royalties or other compensation arising from or related to the use of the image.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Thank you for taking the time to provide us with this information. Please return the form to the Defiance Area Chamber of Commerce by mail or email.**