



# Chamber Chat

Please fill form out completely

Company Name: \_\_\_\_\_ Contact Person: \_\_\_\_\_

Address: \_\_\_\_\_ City \_\_\_\_\_ State/Zip \_\_\_\_\_

E-mail: \_\_\_\_\_ Phone: \_\_\_\_\_

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

### GUIDELINES FOR PLACEMENT

- Chamber Chat is emailed to Chamber members every Monday
- Chamber Chat is limited to (2) Member Events per issue
- Placement of Event is at the Chamber Staff Discretion
- You must be promoting a **special event** that has wide appeal for Canton Chamber Members
- We cannot promote products, sales or discounts

### PLEASE INCLUDE THE FOLLOWING INFORMATION ABOUT YOUR EVENT

Name of Event \_\_\_\_\_

Date of Event: \_\_\_\_\_ Day of Week: \_\_\_\_\_ Time: \_\_\_\_\_

Place: \_\_\_\_\_ Cost (if any): \_\_\_\_\_

RSVP Phone #: \_\_\_\_\_ RSVP Deadline: \_\_\_\_\_

Brief description of the event (25 words or less): \_\_\_\_\_

### PAYMENT IS DUE PRIOR TO PUBLICATION

Start Date: \_\_\_\_\_ (1) week \$20 (2) Weeks \$30 (3) Weeks \$40

\_\_\_\_ Check Enclosed \_\_\_\_ MC \_\_\_\_ Visa \_\_\_\_ Discover Exp. Date: \_\_\_\_\_ Card zip code \_\_\_\_\_

Account: \_\_\_\_\_ Signature \_\_\_\_\_

Fax or Mail this Form to: **Canton Chamber of Commerce ♦ 45525 Hanford Rd ♦ Canton, MI 48187 ♦ Fax 734.453.4503**

### FOR OFFICE USE

Date Rec.: \_\_\_\_\_ Approved: Yes/No \_\_\_\_ Paid: Yes/No \_\_\_\_ Ck # \_\_\_\_\_ Credit Card \_\_\_\_\_

Notes: \_\_\_\_\_