

MONTHLY SUBSCRIPTION PROGRAM

The Delaware Small Business Chamber offers a monthly subscription for memberships at all levels.

By filling out this form and sending in your membership application for the Subscription Plan, you agree that you are signing up for this program to be billed once a month. You must be in the plan **a minimum of 6 months** and can cancel any time after that **with at least 60-days written notice prior to the next withdraw date**. This is an on-going subscription until cancelled and is not renewed annually. At any time you may choose to change from a monthly plan to a yearly plan that will go for a fiscal year from the month you change. Any member who's payment does not go through for that month agrees to pay a \$5 re-submission fee and any member who has 3 failed payments in any given time will need to change to a yearly plan.

Representative Name	Today's Date			
Company Name:				
Address:	City	_ State	Zip	
Email:	Website: DOB			
Phone Number				
Categories of your business: (w choices)	e will put you in the	appropria	te categories	from y
Credit Card Number				
Name on Credit Card				
Exp date	CVV Code _			
Billing address				
Membership level to join		_ \$	per month	
Signature	Referred by_			
Datum andication by analy Connections	3 dala ali anche i anc	2 700 2220 -	_	

Return application by email: connections@dsbchamber.com or fax 302-709-2329 or mail to 11F Liberty Plaza, Newark, DE 19711