



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 prior notice before the next withdraw date. This is an on-going subscription until cancelled.

Representative Name _____

Company Name: _____

Address: _____ City _____ State _____ Zip _____

Email: _____ Website: _____

Phone Number _____ DOB _____

Categories of your business: (we will put you in the appropriate categories from your choices)

Credit Card Number _____

Exp date _____ CVV Code _____

Billing address _____

Membership level to join. _____ \$ _____ month

Signature _____ Referred by _____

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