



The South Niagara Chambers of Commerce



The South Niagara Chambers of Commerce (SNCC) including Greater Fort Erie, Niagara Falls, Port-Colborne-Wainfleet, and Welland/Pelham serve a combined 2000 members. Our alliance spans across the region and has connections to cross border and overseas business contacts. Through our far reaching network and meaningful programming, we aim to provide members across the region with opportunities to grow their client base, access resources and promote their business through innovation, cooperation and excellence in service.

TAKE A LOOK AT WHAT YOU CAN ACCESS!

Chamber Affinity Program:

Chamber Plan, Employee Benefits
Merchant Services Plan
Preferred Gas Prices
Digital Marketing/Advertising Program
Niagara Gift Cards

Signature Events:

Community Business Awards
Southern Tier Mayors' Luncheon
Chamber Challenge Classic
International Women's Day
Niagara's Game Changer Series

Niagara Networks
Charity Auctions
State of the City/
Town Addresses
Lobster & Laughs

Networking Across South Niagara

Joint Business After Five

Membership Morning Meetings

New Member Welcome Breakfast

Additional Key Products and Services

SNCC Website includes Business Directory
Chamber Window Decal
Podcast Series
Office Referrals
Breakfast Forums

E-Blast/Membership Monday
South Niagara Chamber News
South Niagara Business Book
Keynote Speakers
Sponsorship

Custom Build Your Regional & Bi-National Membership:

The Fort Erie, Grimsby, Lincoln, Niagara Falls, NOTL, Port Colborne-Wainfleet, Welland/Pelham, West Lincoln, Thorold and Niagara USA CHAMBER have developed an Associate Membership which allows you to be involved in the communities that are most meaningful to you and your business.

Contact:

Sandra Tomori - Welland/Pelham Chamber of Commerce. 32 East Main St. Welland, ON. L3B 3W3
Phone: (905)-732-7515. Email: sandra@wellandpelhamchamber.com Website: www.wellandpelhamchamber.com



Membership Application - 2019

Company Name: _____

Address: _____ ~Internal Only _____

City: _____ Province: _____ Postal Code: _____

Phone #: _____ Mobile: _____ Fax #: _____

Email: Publish _____ Internal Use Only: _____

www: _____ ~ _____

No. of employees: _____ Year Business established: _____ Type of Business: _____

Preferred Categories: 1: _____ 2: _____ 3: _____

Contact Name(s): _____

Method of Payment: Cash Cheque Visa MasterCard: Credit Card # _____ Exp: ____/____/____ CVV: _____

Enclosed is my payment in the amount of \$ _____ covering dues for one year beginning _____ 2019.

I/We agree to support the aims and objectives of the Welland/Pelham Chamber of Commerce, to promote the commercial, civic, industrial and agricultural interests of this area:

Signature: _____ Date: _____

# of Full Time Employees	Annual Membership	One-time Admin Fee	HST	First Year Total	# of Voting Delegates
1-2	\$226.59	\$25.00	\$32.71	\$284.30	One
3-5	\$254.97	\$25.00	\$36.40	\$316.37	One
6-10	\$372.09	\$25.00	\$51.62	\$448.71	Two
11-25	\$474.83	\$25.00	\$64.98	\$564.81	Three
26-50	\$649.79	\$25.00	\$87.72	\$762.51	Four
51-100	\$833.68	\$25.00	\$111.63	\$970.31	Five
101-250	\$1,127.51	\$25.00	\$149.83	\$1,302.34	Six
251-500	\$1,716.18	\$25.00	\$226.35	\$1,967.53	Seven
501-750	\$2,127.57	\$25.00	\$279.83	\$2,432.40	Seven
751-1000	\$2,516.87	\$25.00	\$330.44	\$2,872.31	Eight
1000+	\$2,862.34	\$25.00	\$375.35	\$3,262.69	Eight
Individual/Non-profit	\$146.41	\$25.00	\$22.28	\$193.69	One
NCP Associate	\$75.00		\$9.75	\$84.75	N/A
NOTL Rate	\$125.00		\$16.25	\$141.25	N/A

Membership Fees are for a twelve-month period.

Fees are based on the average number of full time employees (including owners, managers, etc.) per firm.

Please select the correct fee from the scale.

**Please note that with an Individual Membership, your name is listed under the "Individual" category and not by your Company name.

***See Reverse for Associate Rate and Conditions
Individual/Non-Profit Membership **
NCP Associate Rate
Niagara On The Lake Rate

The Board of Directors of the Welland/Pelham Chamber of Commerce accepts the above application for membership.

Date approved: _____ President's Signature: _____

The Board of Directors of the _____ Chamber of Commerce accepts the above

Application for membership: Date approved: _____ President's Signature: _____