

Yes!

*I am interested in the
Auburn Hills Chamber*

Enclosed is our check for \$ _____

Charge to my Visa or Mastercard

Account No. _____ Exp. Date _____

Name of Company _____

Street Address _____

City _____

State _____ Zip _____

Business Phone _____

Fax Number _____

E-mail Address _____

Number of employees: Full Time _____

Part Time _____

Business Category: _____
(see enclosed list)

Designated contact person _____

Title _____

I Learned About the Chamber from:
