



**The Greater Weiser Area Chamber of Commerce**

309 State Street ~ Weiser ID 83672

Office: 208-414-0452 ~ Fax: 208-414-0451

Email: info@weiserchamber.com ~ www.weiserchamber.com

**Membership Application**

Business Name: \_\_\_\_\_

Contact person: \_\_\_\_\_ Title: \_\_\_\_\_

Physical Address: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email address: \_\_\_\_\_

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

**CHAMBER MEMBERSHIP INVESTMENT STRUCTURE**

2 part time employees = 1 full time

(please check the level that is appropriate for your business)

Individual / Non Profit .....	\$50	7 – 10 Employees .....	\$150
Business with no employees .....	\$75	11 – 15 Employees .....	\$175
1 – 2 Employees .....	\$100	16 – 20 Employees .....	\$200
3 – 6 Employees .....	\$125	21+ Employees .....	\$300

**OPTIONAL TWO RIVERS HEALTH CARE PROGRAM**

*Participation in the Two Rivers Health Care Program is an optional program available to all chamber members **who have no current health insurance**. You must pay your regular Chamber dues in order to qualify for the Health Care Program. This program is an additional expense to your regular chamber dues. If you would like more information on the Two Rivers Health Care Program, please contact the Weiser Chamber Director.*

Individual / Non Profit .....	\$75	7 – 10 Employees .....	\$175
Business with no employees .....	\$100	11 – 15 Employees .....	\$200
1 – 2 Employees .....	\$125	16 – 20 Employees .....	\$225
3 – 6 Employees .....	\$150	21+ Employees .....	\$325

Amount of Investment Enclosed \$ \_\_\_\_\_

*Please remember that membership dues are not deductible as charitable contributions for federal income tax purposes. However, they are deductible for most members as an ordinary and necessary business expense.*

Signature \_\_\_\_\_ Date \_\_\_\_\_

***Welcome to the Chamber!***

For Office Use Only						Date: _____
___ Website	___ Welcome Card	___ Email Address Book	___ QuickBooks	___ ED Office	___ Member List	



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*Health Care Partnership Membership Roster*



Business Name: \_\_\_\_\_

Enrollee 1: \_\_\_\_\_ Spouse: \_\_\_\_\_  
Dependent 1: \_\_\_\_\_ Dependent 2: \_\_\_\_\_  
Dependent 3: \_\_\_\_\_ Dependent 4: \_\_\_\_\_

Enrollee 2: \_\_\_\_\_ Spouse: \_\_\_\_\_  
Dependent 1: \_\_\_\_\_ Dependent 2: \_\_\_\_\_  
Dependent 3: \_\_\_\_\_ Dependent 4: \_\_\_\_\_

Enrollee 3: \_\_\_\_\_ Spouse: \_\_\_\_\_  
Dependent 1: \_\_\_\_\_ Dependent 2: \_\_\_\_\_  
Dependent 3: \_\_\_\_\_ Dependent 4: \_\_\_\_\_

Enrollee 4: \_\_\_\_\_ Spouse: \_\_\_\_\_  
Dependent 1: \_\_\_\_\_ Dependent 2: \_\_\_\_\_  
Dependent 3: \_\_\_\_\_ Dependent 4: \_\_\_\_\_

Enrollee 5: \_\_\_\_\_ Spouse: \_\_\_\_\_  
Dependent 1: \_\_\_\_\_ Dependent 2: \_\_\_\_\_  
Dependent 3: \_\_\_\_\_ Dependent 4: \_\_\_\_\_

Enrollee 6: \_\_\_\_\_ Spouse: \_\_\_\_\_  
Dependent 1: \_\_\_\_\_ Dependent 2: \_\_\_\_\_  
Dependent 3: \_\_\_\_\_ Dependent 4: \_\_\_\_\_

Enrollee 7: \_\_\_\_\_ Spouse: \_\_\_\_\_  
Dependent 1: \_\_\_\_\_ Dependent 2: \_\_\_\_\_  
Dependent 3: \_\_\_\_\_ Dependent 4: \_\_\_\_\_

Enrollee 8: \_\_\_\_\_ Spouse: \_\_\_\_\_  
Dependent 1: \_\_\_\_\_ Dependent 2: \_\_\_\_\_  
Dependent 3: \_\_\_\_\_ Dependent 4: \_\_\_\_\_

Enrollee 9: \_\_\_\_\_ Spouse: \_\_\_\_\_  
Dependent 1: \_\_\_\_\_ Dependent 2: \_\_\_\_\_  
Dependent 3: \_\_\_\_\_ Dependent 4: \_\_\_\_\_

Enrollee 10: \_\_\_\_\_ Spouse: \_\_\_\_\_  
Dependent 1: \_\_\_\_\_ Dependent 2: \_\_\_\_\_  
Dependent 3: \_\_\_\_\_ Dependent 4: \_\_\_\_\_

To qualify for the Two Rivers Health Care Program, a Chamber member, must have **no current health insurance**, pay the regular Chamber dues investment and pay the additional Health Care program investment according to the cost structure. The Two Rivers Health Care Program entitles the participants to a 50% discount for medical services and a 40% discount on basic laboratory tests furnished in the Weiser or Cambridge clinics. Durable medical equipment, therapeutic injections, and other high cost services purchased by the clinic will be offered at \$10.00 above cost. Services MUST be paid at the time of services. **This plan provides basic primary care discounts only. There are no provisions for hospital, radiological or pharmaceutical services.**