



Amery Economic Development Corp.

## MEMBERSHIP APPLICATION

Date: \_\_\_\_\_

Type of Membership:  Business  Organization  Individual

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

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

\_\_\_\_\_

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

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

If applicant is a business or organization, identify ONE responsible person to receive all notices.

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

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

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

Membership Level:

- \$1,000 Platinum Business Member
- \$500 Gold Business Member
- \$250 Silver Business Member
- \$100 Individual Member

Please send check payable to AEDC  
and completed application to:

AEDC  
PO Box 124  
Amery, WI 54001