

Date: _____



www.dousmanchamber.org

PO Box 2 - Dousman, Wisconsin 53118

COMMUNITY MEMBER MEMBERSHIP APPLICATION
Annual Dues are \$25.00

Please fill out this form and mail it along with a check
in the amount of \$25.00 to:

Dousman Area Chamber of Commerce
PO Box 2, Dousman WI 53118

Questions? Please contact Ken Leinweber, Chamber Membership Ambassador:
kleinweber@outlook.com or 262-719-9581

Name: _____

Address: _____

Phone: _____ Email: _____

How long have you been in the Dousman Area: _____

Where do you work? _____

How can the Chamber help you feel connected to your community?

Thank you for joining!