



P.O. Box 101 • 110 E. Third Street, Wray, Colorado 80758  
Phone: 970.332.3483 • Fax: 970.332.3486  
director@wraychamber.net • www.wraychamber.net

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## Community Service Membership Application

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

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Alternate Phone Number: \_\_\_\_\_

I do not currently receive e-mail updates from the Wray Chamber and wish to be added to the database.

E-Mail Address: \_\_\_\_\_

### WE ACCEPT PAYMENT BY CHECK OR CREDIT CARD

*If you wish to pay by credit card, please fill out and sign authorization below.*

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## **Community Service Membership Dues Structure: \$50 p/year**

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### Credit Card Authorization

Card Type (circle one): VISA Mastercard Discover Expiration Date: \_\_\_\_\_ / \_\_\_\_\_ CCV#: \_\_\_\_\_

Credit Card Number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

I hereby authorize Keith Lippoldt, Executive Director of the Wray Chamber of Commerce, to charge the above credit card the applicable one time amount of my membership.

\_\_\_\_\_  
Credit Card Holder Signature

## Thank you for your continued support of the Wray Chamber!

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### For Office Purposes Only:

Date Received: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ Check # (if applicable): \_\_\_\_\_ Check Amount: \$ \_\_\_\_\_

CC Charged (if applicable): \_\_\_\_\_/\_\_\_\_\_ Amount \$ \_\_\_\_\_ Authorization #: \_\_\_\_\_