



New Member Registration (\$120-)

Date: _____

Business Name: _____

Contact: _____

Business Address: _____

Main Phone #: _____

Cell Phone #: _____

Email: _____

Web Page: _____

Type of Business _____

Payable to:
Waldwick Chamber of Commerce
PO Box 323
Waldwick, NJ 07463

OUR MISSION STATEMENT:

To Promote, enhance and contribute to the well-being of the business community while preserving the distinctive character, natural resources and heritage of the greater Waldwick area as a basis of a healthy economy.