UPDATE YOUR MEMBERSHIP INFO



Please take a moment to fill out this form to ensure your listing is accurate in the Chamber's Online Business Directory. This PDF (digital) is fillable and, once completed, can be returned via email to <u>kaziah@gcchamber.org</u> or mailed to the Chamber office – **4069 Broadway, Grove City (43123)**

COMPANY INFORMATION (This info	mation appears in your Business Directory listings)
Business Name	Phone Number () _
Physical Address	
Mailing Address (If different from physical address) General Email	Website URL
	L-TIME Employees Number of PART-TIME Employees
COMPANY REPRESENTATIVE INFORMATION	
PRIMARY Representative Name:	Position/Title
Email	Phone / Extension
(this individual is your company's first point of con	act for the Chamber)
BILLING Representative Name:	Position/Title
Email	Phone / Extension
(this individual is responsible for receiving and har	lling GCACC invoices, making payments for advertising/sponsorships, event registrations etc.)
ADDTIONAL REP INFO	
Rep Name	Position/Title Phone / Extension
Rep Name	Position/Title Phone / Extension
Rep Name	Position/Title Phone / Extension

ADDITIONAL INFORMATION YOU WOULD LIKE THE CHAMBER TO ADD TO YOUR BUSINESS PROFILE:



