



RE: TROY CHAMBER OF COMMERCE MEMBERSHIP FOR 2025

Dear Local Business Leader:

Since its organization in 1954, the Troy Chamber of Commerce has promoted businesses in the Troy area, invested in the region's economic growth, and enhanced the local community through the contribution of money, resources and volunteers to many events and programs. You may already be familiar with many of those outreach activities, such as: Hometown Heroes Banner Project; the concessions tent at the Troy Town Cruisers Car Shows; Halloween Parade; Hometown Christmas; Christmas decorations in downtown Troy, and the Chamber's Facebook page (which promotes local business offers and sales).

As always, the Chamber's leaders are committed to reinvesting a substantial portion of its annual dues into member benefits and services. Over the past seven years, the Chamber's officers and committees also have committed additional attention to providing business education and marketing opportunities to its members, such as a summer mixer at Alparon Park and presentations by representatives of the Central Bradford Progress Authority, Western Bradford Development Authority and government officials.

Your participation with the Chamber will strengthen your community, while giving you additional resources you can use to augment your business. On behalf of the Chamber's over 70 local member businesses, we hope you will consider joining the Chamber. Please complete and return the application and payment, to the address shown on the form by March 1, 2025.

Sincerely,

The 2025 Troy Chamber of Commerce Officers

Bonnie Seeley – President Charlie Earle – Vice President Elizabeth Card – Treasurer



2025 TROY

CHAMBER OF

COMMERCE MEMBERSHIP APPLICATION

BUSINESS INFORMATION		
Business Name:	Business Address:	Owner(s)/Manager(s):
Business Phone:	Business Email:	Business Website:
CONTACT INFORMATION		
Contact Person(s):	Mailing Address (if different from business address):	Is this person a decision maker for your business?
Contact Phone:	Contact Email:	Meeting Representative(s) (if different from contact):
<p>The Chamber communicates with its members by email. Do you require an alternative form of communication, such as fax, mail or telephone? If so, please specify how you would like to be contacted.</p>		
<p>Business Information: Please provide a detailed description of your business (including information about goods and services offered), to assist the Chamber with directory, advertising, etc. Include a brochure or rack card, if you have one.</p> <p>Facebook Page or Instagram Page Links:</p>		

DUES SCHEDULE: Please check the applicable box to identify the classification of your business.

- | | |
|---|---|
| <input type="checkbox"/> Financial Institution (\$165.00) | <input type="checkbox"/> Small Business (< 5 employees) (\$65.00) |
| <input type="checkbox"/> Large Business (> 20 employees) (\$115.00) | <input type="checkbox"/> Local Non-Profits (No employees) (\$15.00) |
| <input type="checkbox"/> Medium Business (5-20 employees) (\$90.00) | |

CHAMBER GIFT CERTIFICATE PROGRAM: Would you like to be a participating business? Yes No

Please mail your completed application, with dues payment, to the following address no later than March 1, 2025. Troy Chamber of Commerce, P.O. Box 104, Troy, PA 16947.