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Schoharie County Business Generators Group Application for Membership

Name _____ Business Name _____

Industry _____

Telephone _____ Fax _____

Street Address (of business) _____

State _____ Zip _____ E-Mail _____

Nature and Description of Business (please be specific): _____

Are you a member of the Schoharie County Chamber of Commerce? Yes No

Briefly describe your professional business experience. Please attach your most updated resume (if available).

Business References (please provide 2):

Include name, address, phone number and a description of your business relationship:

Any additional information that you feel might be helpful to the membership committee: _____

I certify that the information provided by me is accurate and that if accepted I will abide by the Standard Operating Guidelines of the Schoharie County Business Generator Group.

Signature _____