

2024 MEMBERSHIP APPLICATION



DATE _____



2024 MEMBERSHIP DUES

\$150

MEMBER INFORMATION

Please fill out the following form with your information

NAME

COMPANY/BUSINESS

ADDRESS

EMAIL ADDRESS

PHONE NUMBER

WEBSITE ADDRESS

WORK NUMBER

Please make check payable to:
Aspinwall Chamber of Commerce

Mail or deliver this application with your check to:

Giuseppe Francioni
PIAZZA DAVINCI
334 First Street
Aspinwall, PA 15215

412.719.7093

giuseppe@aspinwallchamber.com

BUSINESS CATEGORY (PLEASE SELECT ONE)

☐ FOOD & BEVERAGE

☐ COMMUNITY AFFAIRS

☐ PROFESSIONAL SERVICES

☐ MERCHANTS

☐ WELLNESS

☐ HEALTH & FITNESS

☐ BEAUTY & SALON

Our mission is to stimulate a vibrant local economy and help make Aspinwall a very special place to live, work and visit.