



**Merchant Participation Signup**

Business Name: \_\_\_\_\_

Contact: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email: \_\_\_\_\_

PAYMENT

**Check one participation period:**

1<sup>st</sup>     2<sup>nd</sup>     3<sup>rd</sup>    or     4<sup>th</sup> Quarter

**Cost to participate depends on Chamber membership or not:**

\$60 (Non-Chamber-Member Cost)  \$45 (Chamber Member)

**Participation Fee:** \$ \_\_\_\_\_

**Check one payment method:**

By Check      **Make check payable to Greater Edmonds Chamber of Commerce**

By Credit Card    Visa/MC # \_\_\_\_\_ Exp. Date \_\_\_\_\_

I authorize the Greater Edmonds Chamber of Commerce to charge the above participation fee to my credit account for participation in the third Thursday Art Walk for the period shown above.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

*Form must be signed and payment received by the due date to validate your registration*

Payment Due Dates

1<sup>st</sup> quarter      January 1  
2<sup>nd</sup> quarter      April 1  
3<sup>rd</sup> quarter      July 1  
4<sup>th</sup> quarter      October 1

**Greater Edmonds Chamber of Commerce**  
**PO Box 146 Edmonds, WA 98020**  
**425-670-1496 425-712-1808 fax**  
**ChamberofCommerce@EdmondsWA.com**