



2018 Presidents Club Intent

Business: _____

Contact Name: _____

Business Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____ Fax: _____

Email Address: _____

Presidents Club Investment: \$725.00 Amount Enclosed: _____

Check enclosed Invoice Visa MasterCard

Card Number: _____ - _____ - _____ - _____

Exp. Date: ____ - ____ Cardholder's Name/Signature: _____

Security Code _____

Central PA Chamber of Commerce
30 Lawton Lane
Milton, PA 17847

Phone: 570-742-7341 Fax: 570-742-2008

Email: tjaikey@centralpachamber.com