

Greater Crown Point Chamber of Commerce

Online Member Management Customer Signup Form

Please fill out the following form to the best of your ability. Items marked as "Private", will **not** be displayed to the public. Items **not** marked as "Private" will be available to any individual accessing the Greater Crown Point Chamber of Commerce, Inc website located at <http://www.crownpointguide.com>. At a minimum, ChamberCRM.com recommends that the Company Profile is **not** listed as Private. All e-mail addresses are stored privately and not available to the public, regardless of "Private" status.

Company Profile

Organization Name: _____

Website Address: _____

Primary Contact Number

Phone: _____

Fax: _____

Additional numbers may be added later.

Company Address

Address Line 1: _____

Address Line 2: _____

Address Line 3: _____

City: _____

State: _____

Zip: _____

Account Owner Profile

First Name: _____

Last Name: _____

Title: _____

E-mail Address: _____

Web-Profile Visibility

Set Company Visibility to Private:

Set Account Owner Visibility to Private:

I _____ am the authorized agent for the

Please print first and last name

organization and owner profiled above to provide and authorize the information disclosed. Individually and as the authorized agent I acknowledge that the information listed above and any additional information profiled within the ChamberCRM.com member portal will be published to and viewable by any person accessing the Greater Crown Point Chamber of Commerce member resources and authorize that publication. I further agree that any resources not designated as non-publishable by marking the box labeled "Private" may be viewable to any person accessing the domains and/or sub-domains located at crownpointguide.com and chambercrm.com. By signature below, individually and as authorized agent, the company and myself agree to hold harmless and to indemnify the operating companies of crownpointguide.com (Greater Crown Point Chamber of Commerce, Inc) and ChamberCRM.com (Mindpack Studios, Inc.) of any and all liability which might arise from such access to the information provided herein.

Signature: _____ Date: _____

Please fax this form to 219.663.1989 or US Mail To:

Greater Crown Point Chamber of Commerce, PO Box 343, Crown Point IN, 46307