

## 2017 HORICON CHAMBER OF COMMERCE CHURCH APPLICATION

CHURCH NAME			
CONTACT NAME:			<u></u>
PASTOR 'S NAME:			
PHYSICAL ADDRESS			_
MAILING ADDRESS			-
PUBLIC PHONE #	CI	ELL	
OTHER PHONE #	FA	<b>X</b> #	_
WEBSITE			
FACEBOOK:			
E-MAIL ADDRESS			_
Year church began:			
Please visit www.horiconchamber.co			
of this sheet. If you are a new church	h, write on th	e back of this sheet a brief descri	ription of your
church as you would like it displayed	d on our webs	site.	
SERVICE HOURS:			
HOURS IN OFFICE:			
Please make sure our office has bro	ochures to h	and out.	
We need volunteers to help with our	r fundraisers	and events. Please check	
at least one event that someone fro	m your chur	ch would volunteer to help:	
Steak Fry (usually the Fr	riday before I	Mother's Day)	
Tour de Marsh (First Sat	turday of Jun	e)	
Autumn Art on the Mar	•	•	
Cookies and Milk with Santa (Second Saturday of December)			
Start up a new fundraise		Saturday or December,	
Fee: Free to Horicon Churches	CI		
ree. Thee to Horicon Charenes	Return to:	<b>Horicon Chamber of Commerce</b>	
	Keturn to.	P.O. Box 23	
Date received		Horicon WI 53032	
Entered in Data			
		920.485.3200	

EMAIL: WRITEUS@HORICONCHAMBER.COM

