

Block Island Chamber of Commerce
Drawer D
Block Island, RI 02807
401 466-2982, Fax 466-2711
Email: www.bichamber@yahoo.com

Membership Application
(Mainland)

Name of Business or Individual:

Type of Membership:

Insurance Only ____

Name of Owner _____

Address: _____

City/State/Zip

Telephone Number: _____ Date: _____

Annual Membership Fee:

Insurance \$75.00

Please complete the application and forward along with your payment to the Block Island Chamber of Commerce at the address above. Your returned check is your proof of membership. Contact HSA at 1-401 942-0966 (Ext. 101 or 104) to receive information on policies and prices for health care.

Thank you for joining the Block Island Chamber of Commerce.