



# BAYVILLE

## CHAMBER OF COMMERCE

*Your Bridge To Business Success*

VINCENT MOSCATO  
*PRESIDENT*  
MICHAEL CARROZZA  
*VICE PRESIDENT*  
RICHARD VALICENTI  
*TREASURER*  
AMANDA VALDERRAMA  
*RECORDING SECRETARY*

P.O. BOX 113, BAYVILLE, NY 11709  
THEBAYVILLECHAMBEROFCOMMERCE@GMAIL.COM WWW.BAYVILLECHAMBEROFCOMMERCE.COM

### Membership/"Friends of the Chamber" Associate Membership Dues 2026

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

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

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

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

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

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

Type of Business \_\_\_\_\_

☐

**Full Chamber Membership dues (\$120 for the entire year)**

Includes listing, website link, various promotional material throughout year

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**"Friends of the Chamber" Associate Membership dues (\$60 for the entire year)**

Non-Business owner/individual - Includes website listing

☐

I want to make an additional donation or to sponsor an event

Amount \_\_\_\_\_ Event \_\_\_\_\_

I AGREE TO ABIDE BY ALL BY-LAWS AND CONDUCT MY BUSINESS IN A PROFESSIONAL MANNER AT ALL TIMES.

X

SIGNATURE \_\_\_\_\_

DATE \_\_\_\_\_

PLEASE PRINT CLEARLY AND COMPLETE ALL INFORMATION

Please mail this page along with your check payable to **The Bayville Chamber of Commerce**  
to our P.O. Box above or remit to any of our officers

**Thank you for getting involved and supporting our Bayville business community. We look forward to seeing you at our regularly scheduled, scholarship and committee meetings and our community events throughout the year**

OFFICE INFORMATION

DATE PAID \_\_\_\_\_ AMOUNT \_\_\_\_\_ CK# \_\_\_\_\_ CASH \_\_\_\_\_

TREASURER \_\_\_\_\_ DATE: \_\_\_\_\_