

...Get Connected!

Historic Courthouse, One West Market Street, Lewistown, PA 17044

Phone: 717.248.6713, E-mail: info@juniatarivervalley.org, www.juniatarivervalley.org

MEMBERSHP INVESTMENT APPLICATION

Company/Organization.	Company/Organization:	
Contact Name:		
Title:		
Address:		
City, State & Zip:		
Telephone:	Fax:	
E-mail:	Web:	
Courtesy Contact:		
Title:		
Telephone:	Fax:	
E-mail:		
(No additional charge, if more than one, please submit on separate piece of paper) Type of Business:		
Number of Employees: Full Time: Part Time:		
Membership Investment (see rate schedule on back):		
Preference for Billing: ANNUAL OR SEMI-ANNUAL		
Signature:		
Method of Payment: Check made payable to JRVCC Please mail an invoice Please Charge \$to my Credit Card		
Print Cardholder Name:		
Billing Address (if different from above)		
Account Number:EX	rsecurity code:Billing zip code	

Mission Statement:

Membership Investment	
Number of Full Time Employees	Rate
(part time are considered 1/2 when calculating)	1.000
1-5	\$140.00
6-10	\$190.00
11-25	\$295.00
26-50	\$335.00
51-75	\$385.00
76-100	\$445.00
101-150	\$495.00
151-200	\$545.00
201-250	\$595.00
251-300	\$660.00
301-350	\$710.00
351-400	\$760.00
401-450	\$810.00
451-500	\$860.00
501-600	\$910.00
601-700	\$1010.00
701-800	\$1110.00
801-9001	\$1210.00
901 & Over	\$1310.00
Retired Business Members	\$65.00
Charities & Religious Organizations -501 C (3)	\$115.00
Business Association or Co-op	\$200.00
Municipalities (by population)	\$90.00/\$165.00/\$240.00
County Government	\$1015.00
Industrial Development Corporation	\$535.00
Financial Institutions	\$12/million of deposits
School Districts	\$265.00