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**Business/Organization Profile:**

Business/Organization Name: \_\_\_\_\_

Primary Contact: \_\_\_\_\_

Primary Contact Position/Title: \_\_\_\_\_

Primary Phone Number: \_\_\_\_\_

Primary Position Email: \_\_\_\_\_

Alternate Contact & Title: \_\_\_\_\_

Alternate Phone Number: \_\_\_\_\_

Alternate Contact or Business Email: \_\_\_\_\_

Fax: \_\_\_\_\_

Facebook or other Social Media (if any): \_\_\_\_\_

Website: (if any): \_\_\_\_\_

Bullet Text: \_\_\_\_\_

Hours: \_\_\_\_\_

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

Driving Directions: \_\_\_\_\_

Business/Organization Description:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Our Business Offers (if any):**

- |  |   |
|--|---|
| <input type="checkbox"/> Online Ordering | <input type="checkbox"/> Curbside Pick-Up |
| <input type="checkbox"/> Gift Cards      | <input type="checkbox"/> Local Delivery   |
|  | <input type="checkbox"/> Shipping         |