



Passport to Christmas 2017

The Chamber is gift wrapping your Christmas specials into a book of holiday promotions. One lucky shopper will enjoy \$2,500 this holiday season! Together, by shopping local, we are all winners. Businesses we want to promote your holiday specials, starting on Moonlight Madness, Friday, November 17.

There are two forms to complete, each going to different locations. The form below goes to The Business Factory and the form on page 2 to The Chamber.

If you have any questions, we will gladly help (# 780 849.3222 or email sldcc@telus.net). Thank you!

Program Highlights:

Grand Prize Draw of \$2,500; must be spent at participating sponsors.

To be eligible for the grand prize draw, participants are asked to visit 12 locations and in the spirit of the season, may make four (\$10 minimum value) donations to the Food Bank or Santa Anonymous

- Only 2,000 Booklets Printed
- 4 - \$100 Weekly Draws
- All locations receive an entry box

Getting Started

Please complete the following and return to **The Business Factory***:

Business Name: _____

Physical Address: _____

Business Phone Number: _____

Hours of Operation: _____

Are you offering a promotion for all 4 weeks? Yes No

- If so, please describe: _____

Are you offering a one-time promotion? Yes No

- If so, please describe: _____

Have you participated in The Passport to Christmas before?

Can you provide an electronic file of your logo? Yes No

Will you accept Food Bank/Santa Anon. Donations Yes No

Contact Person: _____

E-Mail: _____

Phone: _____

Please provide logo and completed form above to

- **The Business Factory (# 780 849.6660)**

kendall@businessfactory.ca; Fax #849.6662; drop off in person by

Monday, October 30

Registration Fees:

	<u>Chamber Members</u>	<u>Non-Members</u>
Home Based Businesses	\$ 50.00	\$ 150.00
1 Employee	\$ 50.00	\$ 150.00
2 - 10 Employees	\$100.00	\$ 200.00
11 - 50 Employees	\$150.00	\$ 250.00
51 & Up Employees	\$200.00	\$ 300.00

Registration Form:

Business Name: _____

Billing Address: _____

No. of Employees: _____ Ph. #: _____

Contact Person: _____

Email Address: _____

Preferred Method of Payment:

_____ Please invoice us for \$ _____

_____ Cheque to Follow for \$ _____

_____ Visa or MasterCard - please call us

Return this form to the Slave Lake & District Chamber of Commerce
email sldcc@telus.net; PO Box 190 Slave Lake T0G 2A0
#780 849 - 3222

Important Program Information

- The program will start on Friday, November 17th and run until Friday, December 15th;
- Each location will have a drop box;
- Businesses may choose whether or not to offer a special promotion as part of the weekly draw;
- To see a draft of the Passport Savings Book, please stop by the Business Factory or Chamber Office

Registration fees will go toward the cost of printing, prizes and advertising.

All sponsors receive a poster promoting this Shop Local Program



Not a Chamber Member? Take Advantage of all the Benefits.....



APPLICATION FOR MEMBERSHIP

Name of Company/Organization: _____

Mailing Address: _____

Postal Code: _____ Telephone #: _____ Extension: _____

Email Address: _____ Fax #: _____

Designated Representative & Their Position: _____

Optional: Website Address a/o Brief Description of Business (to be included in Chambers' web page to promote your Company):

Payment Schedule (5% G.S.T. # R10798 4924 RP0001):

	<u>Amount</u>	<u>G.S.T.</u>	<u>Total</u>
1 - 5 Employees	\$165.00	\$ 8.25	\$173.25
6 - 15 Employees	\$275.00	\$13.75	\$288.75
16 - 50 Employees	\$400.00	\$20.00	\$420.00
51 + Employees	\$500.00	\$25.00	\$525.00
Individual Membership	\$ 50.00	\$ 2.50	\$ 52.50
Non-Profit Organization	\$ 50.00	\$ 2.50	\$ 52.50
Home Based Business	\$100.00	\$ 5.00	\$105.00

Payment Enclosed: _____ Yes _____ No

Please invoice us for: \$ _____

Contact us to process payment by Credit Card a/o Debit: _____

I hereby apply for membership in the Slave Lake & District Chamber of Commerce and agree to be governed by the requirements of the by-laws and regulations of the Slave Lake & District Chamber of Commerce. Contact permission is hereby granted to contact us in keeping with Anti-Spam Legislation.

Date: _____

Signature: _____