

Member Spotlight Application

You must be a member of the Port Clinton Area Chamber of Commerce to participate in this program.

Business Name:

Physical Address:

Phone Number:

Questions:

1. Give us a brief overview of your company in 2-3 sentences.
2. What do you feel is your company's biggest strength?
3. What is the best thing that happened to you this past year?
4. What is your favorite part about what you do?

Please return this application to
admin@portclintonchamber.com or call (419)734-5503
with any questions.

Please note: Member Spotlights will be showcased in the order they are received. They will be shown on our social media pages and on our website.