



NEW

Member-to-Member Discount Program

We are pleased to announce another benefit for being a valued chamber member. You are now eligible to promote your products and services through our new Member-to-Member Discount Program. This program will offer Hilliard Chamber members (and their employees) discounts on products and services from other Hilliard Chamber members. It will also help your business increase its visibility in the business community.

Participating businesses will have their contact information and the discount available on the Chamber website. Member-to-Member discounts will be promoted throughout the year via the Hilliard Chamber Website and the monthly newsletter.

To participate in the program you must:

- Be a Hilliard Chamber of Commerce member in good standing.
- Discount must have a specific value.
- Discount must be exclusive to Chamber members rather than a general discount offered through other means.

Questions?

Contact the chamber office at (614) 876-7666.

Application

Would you like to offer a discount on your products or services to other Hilliard Chamber members? If so, please provide the following information.

Business Name:
Contact Name:
Business Address:
City, State, Zip:
Phone:
Website:
Mailing Address:
City, State, Zip:
Email:
I would like to offer the following discount to Hilliard Chamber of Commerce members:
(Maximum 30 words)

-- OVER FOR CONDITIONS AND AGREEMENT --

Member-to-Member Discount Program - Continued

By signing this application, I agree to be a participating Hilliard Chamber of Commerce Member-to-Member discount provider and will give discounts to all Hilliard Chamber of Commerce members and their employees, and to indemnify, defend and hold the Hilliard Chamber of Commerce, its board of directors, employees, and membership, harmless against any and all losses, liabilities, damages, costs and claims. I will offer this discount until I notify the chamber in writing to discontinue the offer or until I cease to be a member in good standing. I agree to abide by the above information and fully understand that it is my responsibility to notify the Chamber of any and all changes in writing.

Print Name _____

Signature _____ **Date** _____

Please return your completed application to:

**Hilliard Chamber of Commerce
4081 Main Street
Hilliard, OH 43026**

or

Fax to: 614-876-3113

Make sure you fax both front and back. We cannot accept the form without your signature!

ADDITIONAL TERMS AND CONDITIONS: Neither the Hilliard Chamber of Commerce or its board of directors, employees nor membership, will be liable for your products or services or for any inaccuracy in marketing materials. The Hilliard Chamber of Commerce and/or its board of directors can terminate this Contract on 30 days notice (or immediately if you commit material breach, if your business is sold or changes ownership, or if you discontinue your membership with the Hilliard Chamber of Commerce). I understand that the Chamber reserves the right to not accept a discount offer into the program at the discretion of the Chamber. You, your employees, and your affiliates will maintain the confidentiality of any information belonging to the Hilliard Chamber of Commerce and/or its board of directors and that you will not disclose it to any third party. You agree to indemnify, defend, and hold the Hilliard Chamber of Commerce, its employees, its board of directors, and affiliates harmless against any and all losses, liabilities, damages, costs or other expenses or claims or counterclaims of third persons or entities related to this Contract, except for any such claims arising from the Hilliard Chamber of Commerce's gross negligence or willful misconduct. Each party waives its right to jury trial for any dispute relating to this Contract. The Hilliard Chamber of Commerce can change any term of this Contract at any time by posting the change on any public section of www.hilliardchamber.org dealing with the member-to-member discount program. Changes will be effective 30 days after posting.