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REQUEST FOR  
GRAND OPENING / RIBBON-CUTTING CEREMONY

Requested Date \_\_\_\_\_ Requested Time \_\_\_\_\_

Name of Business \_\_\_\_\_

Address \_\_\_\_\_

Contact Person \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

Description of Business \_\_\_\_\_

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A minimum of two weeks' notice is required.

Please include a copy of your Grand Opening flyer. If you would like the Chamber to design one for you, please allow a minimum of three weeks and include with this form all the information, pictures and logos you would like included. The Chamber will contact you with pricing information.