

Application for Membership

Business Information

Business Name: _____
 Address: _____ City: _____ State: _____ Zip: _____
 Email: _____ Phone: _____ Fax: _____
 Website: _____ Facebook: _____
 Number of Employees: _____ Year Established: _____ Recommended by _____

Annual Membership Investment

Member Investment Levels (choose one)

- Trustee Membership \$2750
5 Chamber Representatives
- Corporate Membership \$995
3 Chamber Representatives
- Business Membership \$495
1 Chamber Representative
- International Membership \$450
1 Chamber Representative
- Business Associate \$300
1 additional Chamber representative
(associated with an existing Chamber member company)
- Non-Profit Membership \$300
1 Chamber Representative
- Restaurant Membership \$250 + \$250 trade
1 Chamber Representative
- Retail Membership \$365 + \$250 trade
1 Chamber Representative
- Resident Membership \$300
1 Chamber Representative

Payment Method

_____ Membership Investment
 _____ \$25 One-time application fee
 _____ Total

Check Visa MC AMEX Discover Card

Card No: _____
 Exp. Date: _____ Sec. Code: _____
 Billing Address: _____
 City: _____ State/Zip: _____

Signature: _____

Today's Date: _____

Chamber Representative(s)

Name: _____ Title: _____ Email: _____
 Name: _____ Title: _____ Email: _____
 Name: _____ Title: _____ Email: _____
 Name: _____ Title: _____ Email: _____
 Name: _____ Title: _____ Email: _____

Business Directory Category

Primary Category: _____ Key words: _____

