

MEMBERSHIP APPLICATION

Date: _____

The under signed agrees to pay the annual membership investment each year, payable in advance.
The pledge is continuous until cancelled in writing with investment paid in advance for the current year.

NAME OF BUSINESS: _____

PHYSICAL ADDRESS: _____

MAILING ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

PHONE: _____ FAX: _____

EMAIL: _____

WEBSITE: _____

TYPE OF BUSINESS: _____

PRINT & SIGN NAME: _____

TITLE: _____ PAID \$: _____

REFERRED BY: _____

PLEASE LIST ANY OTHER EMPLOYEES WHO WILL ALSO BE CONSIDERED MEMBERS OF THE CHAMBER THROUGH YOUR BUSINESS:

Name & Title: _____

Phone: _____ EMAIL: _____

Name & Title: _____

Phone: _____ EMAIL: _____

Name & Title: _____

Phone: _____ EMAIL: _____

Name & Title: _____

Phone: _____ EMAIL: _____

MEMBERSHIP INVESTMENT FEES:

INDUSTRIAL/RETAIL/SERVICE BUSINESS
>250 EMPLOYEES \$650.00

INDUSTRIAL/RETAIL/SERVICE BUSINESS
101 TO 250 EMPLOYEES \$425.00

INDUSTRIAL/RETAIL/SERVICE BUSINESS
10 TO 100 EMPLOYEES \$325.00

INDUSTRIAL/RETAIL/SERVICE BUSINESS
5 TO 9 EMPLOYEES \$175.00

INDUSTRIAL/RETAIL/SERVICE BUSINESS
2 TO 4 EMPLOYEES \$125.00

INDUSTRIAL/RETAIL/SERVICE BUSINESS
NO MORE THAN ONE
EMPLOYEE \$90.00

NON-PROFIT BUSINESS \$35.00

INDIVIDUAL
MARRIED COUPLE
SINGLE PERSON \$35.00

SENIOR
MARRIED COUPLE
SINGLE PERSON \$25.00