



Application Date: _____

Membership Application

Investment Schedule

Non-Profit/ Individual

\$250

Lodging

Up to 80 Units \$500

Over 80 Unit \$1,000

Financial Institutions

< \$50M in Assets \$2,050

Basic Membership

1— 5 Employees \$300

6— 20 Employees \$400

21— 60 Employees \$500

61— 100 Employees

\$1,000

100+ Employees \$1,550

Chairman's Cabinet

Prestige \$ 7,550

Platinum \$ 5,050

Gold \$ 3,050

Silver \$ 2,050

Firm Name _____ No. of Employees _____

Address _____

City, State, Zip _____ Phone _____

Fax _____ Website _____

Primary Contact _____ Title _____

Email _____ Is this the Billing Contact? Y N

If No, Please give the billing contact's name and email address _____

TOTAL INVESTMENT \$ _____

AMX/Visa/MC # _____ Security Code _____ Exp. _____

Check # _____ Other _____

Billing Address _____

City, State, Zip _____

Please select a user name & password:

Username _____

Password _____

I understand that, upon acceptance, this application constitutes a continuing agreement, and that membership in the Chamber will continue, with membership investment payable annually, until such time as this agreement is terminated by either party.

*Membership investment may be deductible as an ordinary and necessary business expense. Dues are not a charitable deduction for federal income tax purposes.

Signature _____ **Date** _____

Communications Information: Please provide us with three additional email address to receive e-communications.

Name _____

Email _____

Name _____

Email _____

Name _____

Email _____

For Office Use Only:

NAICS Category _____

Member Source _____

Chamber Recruiter _____

WL ID _____ Processed Date _____

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