



# MEMBERSHIP APPLICATION

Date: \_\_\_\_\_

*Yes! I want to invest in the future of the Valley by supporting the Chamber's programs dedicated to supporting economic development and serving as a voice for all businesses in our region.*

Business Name: \_\_\_\_\_ Established: \_\_\_\_\_

Primary Contact Name: \_\_\_\_\_ Position: \_\_\_\_\_

Location Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Billing Address (if different): \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Main Phone: \_\_\_\_\_ Contact Direct Phone: \_\_\_\_\_

Fax: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Company email: \_\_\_\_\_ Contact email: \_\_\_\_\_

Business Web Address: <http://www.> \_\_\_\_\_

Social Sites: Facebook: \_\_\_\_\_ Twitter: \_\_\_\_\_ Other: \_\_\_\_\_

Business Category: (Please note our formula is similar to the yellow pages.) \_\_\_\_\_

Number of Employees: Full-Time: \_\_\_\_\_ Part Time: \_\_\_\_\_ (2 Part-Time = 1 Full-Time)

Does your profession require that you have a license or certification?  Yes  No

If yes, please include license number and copy of current filing. License Number: \_\_\_\_\_

Additional Contacts to receive Chamber Information:

Name: \_\_\_\_\_ Position: \_\_\_\_\_

Direct Phone: \_\_\_\_\_ email: \_\_\_\_\_

Name: \_\_\_\_\_ Position: \_\_\_\_\_

Direct Phone: \_\_\_\_\_ email: \_\_\_\_\_

Dues Amount: \$ \_\_\_\_\_ + \$25 one time admin fee = Total Amount Due: \$ \_\_\_\_\_

Payment Type:  Check (# \_\_\_\_\_)  MC  Visa  Amex  Discover  Monthly ACH (ask staff for details)

I hereby apply for acceptance as a Member of the Greater Valley Chamber of Commerce. I understand that membership is continuous unless cancelled in writing. For federal income tax purposes, membership in the Greater Valley Chamber of Commerce, as well as any other payments to the Chamber, may be deductible, as ordinary and necessary business expenses and not as a charitable contribution. I hereby accept the terms and conditions above and am authorized to sign for the applicant.

Signature: \_\_\_\_\_ Title: \_\_\_\_\_

### Membership Investment Schedule

Select	Annual Dues Amount
<input type="checkbox"/>	\$320 (Solopreneur)
<input type="checkbox"/>	\$350 (2-5 Employees)
<input type="checkbox"/>	\$400 (6-10 Employees)
<input type="checkbox"/>	11+, Banks, Universities, Utilities Contact the Chamber