



TODAY'S DATE: _____ DATE BUSINESS ESTABLISHED: _____
 BUSINESS NAME: _____
 PRINCIPAL REPRESENTATIVE: _____ TITLE: _____
 E-MAIL: _____ CELL: (____) _____
 ADDITIONAL REPRESENTATIVE: _____ TITLE: _____
 E-MAIL: _____ CELL: (____) _____
 ADDITIONAL REPRESENTATIVE: _____ TITLE: _____
 E-MAIL: _____ CELL: (____) _____
 PHYSICAL ADDRESS: _____
 MAILING ADDRESS: _____
 CITY / STATE: _____ ZIP: _____ # OF EMPLOYEES: _____
 PHONE: (____) _____ FAX: (____) _____ WEBSITE: _____
 BUSINESS CATEGORY (AS IN THE PHONE BOOK): _____
 *ADDITIONAL CATEGORIES (\$25 PER EXTRA LISTING): _____
 BUSINESS DESCRIPTION: _____

 SOCIAL MEDIA LINK(S): _____
 APPLICANT SIGNATURE: _____ REFERRED BY: _____

PAYMENT INFORMATION	
ANNUAL DUES	\$ _____
*ADDITIONAL CATEGORIES	\$ _____
PROCESSING FEES	\$ 50.00
TOTAL.....	\$ _____
<input type="checkbox"/> CASH	<input type="checkbox"/> CHECK # _____
<input type="checkbox"/> AMEX	<input type="checkbox"/> VISA <input type="checkbox"/> MASTERCARD
CARD #:	PIN #: _____
EXP.DATE:	ZIP CODE: _____

2019 NEW MEMBER INVESTMENT SCHEDULE			
# OF EMPLOYEES:			
1-4	\$375.00	130-149	\$1,433.00
5-9	\$459.00	150-199	\$1,606.00
10-19	\$540.00	200-249	\$1,791.00
20-29	\$597.00	250-299	\$1,955.00
30-39	\$706.00	300-349	\$2,129.00
40-59	\$862.00	350-399	\$2,304.00
60-79	\$1,029.00	400-499	\$2,473.00
80-99	\$1,175.00	500+	\$2,965.00
100-129	\$1,264.00	Retired	\$149.00

Large Organizations: Pay according to above schedule plus \$2.00 per employee over 500, then \$1.00 per employee over 1000.

- All employees of Chamber member firms are welcome and encouraged to participate in all Chamber activities.
- Membership dues in the Chamber are deductible from Federal and State Income Tax Returns as an ordinary and necessary business expense.
- Membership is based on the number of FTEs (full time equivalent employees) on a scale determined by the Board of Directors. Your membership investment is payable in advance; membership automatically renews each year unless advanced notice of resignation is given.
- Membership dues include a \$25 subscription to *Open For Business* magazine.

PLEASE COMPLETE THIS SURVEY			
REASON YOU JOINED:	<input type="checkbox"/> NETWORKING	<input type="checkbox"/> LEARNING OPPORTUNITIES	<input type="checkbox"/> COMMUNITY INVOLVEMENT
	<input type="checkbox"/> CREDIBILITY	<input type="checkbox"/> LEGISLATIVE ADVOCACY	<input type="checkbox"/> VOLUNTEER OPPORTUNITIES
IS YOUR BUSINESS:	<input type="checkbox"/> HOME-BASED	<input type="checkbox"/> WOMAN-OWNED	<input type="checkbox"/> MINORITY-OWNED
YEARS OF OWNERSHIP: _____			