



## MEMBERSHIP APPLICATION

Name: \_\_\_\_\_ Job title/occupation: \_\_\_\_\_

Company: \_\_\_\_\_ Industry: \_\_\_\_\_

Cost:  Chamber members, \$50/year  Non-chamber members, \$75/year

Method of payment:  Credit  Check  Cash

Name as it appears on card: \_\_\_\_\_

Card number: \_\_\_\_\_

Expiration date: \_\_\_/\_\_\_ Security code: \_\_\_\_\_  Visa  MasterCard

Mailing Address:  Personal  Business

Street: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Website: \_\_\_\_\_

Please include my contact information in the Young Professionals of Lodi membership directory.

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

How did you hear about us? \_\_\_\_\_

Please return this form to:  
Young Professionals of Lodi  
c/o Lodi Chamber of Commerce  
35 S. School St., Lodi, CA 95240  
info@yplodi.com

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