



Greater Houston LGBT
Chamber of Commerce

Individual Level New Member Application

Use your credit card to join online at www.HoustonLGBTChamber.com

Fill out all information completely. Please print clearly.
Demographic information for internal use only.

Mr. Ms.
 Other

PRIMARY CONTACT NAME _____ SUFFIX (MD, PhD, MA, LMT, JR, ETC.) _____

ADDRESS _____ APT/SUITE _____

CITY _____ STATE _____ ZIP _____

PHONE () _____ EXTENSION _____

MOBILE () _____

EMAIL _____

HOW DID YOU LEARN ABOUT THE CHAMBER? _____

I AM INTERESTED IN VOLUNTEERING: YES NO

MEMBER DEMOGRAPHICS*

PRIMARY CONTACT DEMOGRAPHICS

GENDER IDENTITY	SEXUAL ORIENTATION
<input type="checkbox"/> FEMALE	<input type="checkbox"/> ASEXUAL
<input type="checkbox"/> MALE	<input type="checkbox"/> BISEXUAL
<input type="checkbox"/> Trans-Man F TO M	<input type="checkbox"/> GAY
<input type="checkbox"/> Trans-Woman M TO F	<input type="checkbox"/> HETEROSEXUAL
<input type="checkbox"/> Queer	<input type="checkbox"/> LESBIAN
<input type="checkbox"/> NONE / OTHER	<input type="checkbox"/> PANSEXUAL
	<input type="checkbox"/> QUESTIONING
	<input type="checkbox"/> NONE / OTHER

* Demographic information is requested to assist us in measuring our organizational diversity. This information is not used in connection with your membership; it is for internal use by the Chamber. It will never be shared or included in your online or print listings.

Annual Membership Dues Investment - \$250 / Individual Member

\$ _____ Membership Investment (from above) Method of Payment: Check or Money Order Visa Mastercard AMEX

\$ 35.00 Processing Fee (first year only) CARD NUMBER _____ EXPIRATION DATE _____
(if CC billing address is different from above, please provide)

\$ _____ Total Payment NAME AS IT APPEARS ON CARD _____ CCV/CCID _____

Application/Payment Endorsement

X _____ DATE _____

SIGNATURE

By signing above and/or submitting this application you . . .
Agree to abide by the Chamber's **Standards of Business Conduct & Ethics.**
(Available online at www.HoustonLGBTChamber.com) • Agree not to promote any business or advertise a business through any Chamber advertising platforms or events. • Have read and understand the Chamber's **Membership Payment Terms and Conditions, Privacy Policy and Website Terms & Conditions.**
(Available online at www.HoustonLGBTChamber.com) • Understand that the Chamber will use your email address for sending general communications and invoices.

On occasion the Chamber allows limited one-time use of our member/contact information to certain community organizations as a services to our Members and our community.
Please check here if you do NOT want your information included.

Membership Applications are subject to administrative and/or Board approval.

Submit completed application to the Chamber office via one of the methods below:

Mail:

Greater Houston LGBT Chamber of Commerce
5340 Weslayan #25011
Houston, TX 77265

Email:

info@houstonlgbtchamber.com