



# Company Membership Application

Date \_\_\_\_\_

Business Name: \_\_\_\_\_ Number of FT Employees: \_\_\_\_\_  
 (2 PT = 1 FT)

Business Categories (2 selections from Chamber listing): \_\_\_\_\_

Address: \_\_\_\_\_ City, State, Zip Code: \_\_\_\_\_

Telephone: \_\_\_\_\_ FAX: \_\_\_\_\_ Website: \_\_\_\_\_

Contact Information: (\*required)

Primary Company Representative\*: \_\_\_\_\_ Title: \_\_\_\_\_ Email: \_\_\_\_\_

Other Representative: \_\_\_\_\_ Title: \_\_\_\_\_ Email: \_\_\_\_\_

How did you hear about the Chamber?: \_\_\_\_\_

Identify your preferred referral source : \_\_\_\_\_

I, the undersigned, apply for company membership in The Chamber of Commerce for Greater Montgomery County and agree to pay the annual membership based upon the schedule below. This company membership is non-transferable.

Signature Owner/Manager

Date

### Annual Investment Schedule

Employees	Investment
1 - 5	\$300
6 - 10	\$330
11 - 25	\$425
26 - 50	\$480
51 - 100	\$550
101 - 200	\$600
201 - 500	\$900
501 - 1000	\$1200
Over 1000	\$1500 plus \$0.50 per employee

### Annual Investment:

Annual Membership	\$ _____
Visionary Member Upgrade-\$150	\$ _____
Enrollment Administrative Fee	\$ 25.00
<b>TOTAL</b>	<b>\$ _____</b>

### Payment Type:

Check made payable to: *The Chamber of Commerce for GMC*

Master Card  Visa  American Express  Discover

Card Number: \_\_\_\_\_

Expiration Date: \_\_\_\_\_ Card Code: \_\_\_\_\_

Card Member Name: \_\_\_\_\_

Billing Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Education Institutions/Non-profit Hospitals:** \$450

**Nonprofit Charitable Organizations (501c3) and Government Agencies, Bureaus & Municipalities:**  
 \$100 less than schedule based on employee count

**All Volunteer Non-profit/Unpaid Volunteers:** \$200

### Visionary Membership Benefits:

- Participation in a monthly exclusive Business Resource Council (1 rep to attend per company)
- Two free event tickets (value \$40 or less)
- Preferred seating at events (for all reps)
- Enhanced website positioning & increased webpage content
- Company recognition at Chamber events
- Free ad in one weekly events email
- Concierge service for registration & program updates

**Return application to The Chamber Main Office by mail, email to [wendy@chambergmc.org](mailto:wendy@chambergmc.org) or fax to 267-613-8865.**