

2019 MEMBERSHIP APPLICATION

Business Information:

Business Name _____ Public Email _____

Address _____ City _____ State _____ Zip _____

Mailing Address _____ City _____ State _____ Zip _____

Phone (____) _____ - _____ Fax (____) _____ - _____ Website _____

Describe your principal products/services in 200 characters or less _____

Primary Representative:

Primary Contact Name _____ Title _____

E-Mail (required) _____ Phone (____) _____ - _____

Billing Representative:

Primary Contact Name _____ Title _____

E-Mail _____ Phone (____) _____ - _____

FEE STRUCTURE

Annual Chamber Investment

- \$180 – Non-profit, retired business person, individual
- \$600 - Community Advocate
- \$1,500 – Community Advocate
- \$5,000+ - Community VIP
- \$ _____
- \$300 – Community Member
- \$900 - Community Champion
- \$3,000 – Community Investor

Pay by Credit Card * VISA * MasterCard

Card # _____ Exp. Date ____ / ____ Security Code (3 digit): _____

By checking this box and signing this document, you agree to the content included above on this application.

Applicant's Signature: _____ Date ____/____/____

Send completed application to: **Gaylord Area Chamber of Commerce**
P.O. Box 513 - Gaylord, Michigan 49734 - TEL: 989.732.6333 - FAX: 989.732.7990
e-mail info@gaylordchamber.com Website: www.gaylordchamber.com

Your dues investment provides the revenue to operate the Chamber's Administrative budget. We pledge to use it wisely. Please use this schedule to determine your fair share investment. Membership dues in the Chamber of Commerce may be tax deductible as an ordinary and necessary business expense. Dues paid to the Chamber are not a charitable tax deduction for federal income tax purposes. The Chamber is not a charity, but serves as an advocate organization for area businesses.

Terms and Conditions: Membership & Membership Investment Dues

*Membership investment dues are for a period of one year from the date of inception.

*Memberships are held in the name of the business/organization.

*Main Representative will represent the business and receive Chamber information and mailings, unless otherwise indicated on the application.

*All memberships shall be continuous unless cancelled (A) in writing by the member, (B) by the Chamber for non-payment of dues, or (C) for noncompliance with Chamber by-laws.

*If a member's dues shall become delinquent for a period of sixty (60) days, the delinquent member may no longer be in good standing and will forfeit the right to all Chamber benefits. A delinquency notice shall be given to the delinquent member. If delinquent dues are not brought current within ten (10) days after notice of delinquency, membership may be terminated.

*Membership dues investment is non-refundable.

Communications & Media

*The Chamber may send communications to the business/organization by email and/or phone or fax number provided to keep you updated on Chamber business issues, Chamber events and Chamber programs.

*By providing an email address and a phone and fax number, you are stating you are authorized to and hereby consent for the release of your information and for your business/organization to receive emails, phone calls and/or faxes sent by or on behalf of the Gaylord Area Chamber of Commerce.

*All attendees/members of Gaylord Area Chamber of Commerce events authorize the Gaylord Area Chamber and all of its affiliates to use his/her name, image (such as photograph, video, film, or representation) or recorded voice for promotional purposes.

*Any official policies, views or opinions expressed at the Gaylord Area Chamber of Commerce events, seminars or programs are not necessarily the beliefs or positions of the Chamber, as they are meant for information only, and are not meant to constitute professional, legal or financial advice.

By checking this box and signing this document, you agree to the content included above on this application.

Applicant's Signature: _____ Date ____/____/____