



# Rutherford County Chamber of Commerce Membership Application

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

Company Organization: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Physical Address (if different from mailing): \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ E-mail: \_\_\_\_\_

A/P Contact: \_\_\_\_\_ Main Contact : \_\_\_\_\_

Web Site Address: \_\_\_\_\_

Additional emails: \_\_\_\_\_

How many years has your company been in operation? \_\_\_\_\_

Were you referred by anyone? \_\_\_\_\_ If yes, Who referred you? \_\_\_\_\_

Give a brief description of your business, service and/or product. What would you like for us to tell potential customers about you? (This will be the listing also on the Chamber website: 75 words or less, use key words that describe your product or service that will be searchable via web search engines.) \_\_\_\_\_

List categories you would like to be listed on chamber website:

**MEMBERSHIP CATEGORY:**

Give the number of full-time employees: \_\_\_\_\_

**Check the following category that applies to you**

- |  |          |  |          |
|--|----------|--|----------|
| <input type="checkbox"/> Non-Profit Organization         | \$200.00 | <input type="checkbox"/> Small Industry (50-249 employees) | \$425.00 |
| <input type="checkbox"/> Small Business (1-10 employees) | \$250.00 | <input type="checkbox"/> Industry (250-499 employees)      | \$550.00 |
| <input type="checkbox"/> Commercial (11-49 employees)    | \$320.00 | <input type="checkbox"/> Large Industry (500 + employees)  | \$750.00 |

Annual Payment

Semi-Annual Payment

*Any person, association, corporation, partnership, estate or firm interested in the commercial, industrial, cultural, and civic progress of Rutherford County shall be eligible for Chamber membership. A candidate's application will be regarded as a guarantee of adherence to the Chamber's bylaws, policies and the purpose of the Chamber, which is to promote integrity, good faith and just and equitable principles in business. All applications will be submitted to the Board of Directors for approval.*

Signature of Applicant: \_\_\_\_\_

Paid in Full: \_\_\_\_\_

Chamber Official Signature: \_\_\_\_\_

Approval Date: \_\_\_\_\_