

# MEMBERSHIP APPLICATION

# 2010

BUSINESS/ORGANIZATION NAME: \_\_\_\_\_

PHYSICAL BUSINESS ADDRESS: \_\_\_\_\_

MAILING ADDRESS (if different): \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

PRIMARY CONTACT & TITLE: \_\_\_\_\_

PHONE: \_\_\_\_\_ FAX: \_\_\_\_\_

E-MAIL ADDRESS: \_\_\_\_\_

WEBSITE (Linked to Chamber website): \_\_\_\_\_

BUSINESS DESCRIPTION (For the Member Directory & Chamber Website): \_\_\_\_\_

BUSINESS TYPE: Sole Proprietor \_\_\_ Partnership \_\_\_ Corporation \_\_\_ Non-Profit \_\_\_ Other \_\_\_\_\_ YEARS IN OPERATION \_\_\_\_\_

NUMBER OF FULL-TIME OWNERS & EMPLOYEES (Note: two part-time = one full-time employee) \_\_\_\_\_

## **ANNUAL MEMBERSHIP INVESTMENT**

<b>Non-Profit Organization</b> volunteer only	\$40 _____	Why did you join the Chamber? _____
<b>Individual Citizen</b>	\$50 _____	_____
<b>Business or Non-Profit Organization</b> with paid staff		Are you interested in being on a Chamber Committee? _____
▪ One to two employees	\$50 _____	Are you interested in volunteering for the Chamber? _____
▪ Three to five employees	\$75 _____	Are you interested in learning more about Chamber Benefits? _____
▪ Six to fourteen employees	\$100 _____	Are you interested in being part of our Chamber Benefits Package by offering discounts to Chamber members? _____
▪ Fifteen to forty-nine employees	\$175 _____	
▪ Fifty or more employees	\$300 _____	

- Membership Renewal is One Year from the submission of this application; a delinquency of 45 days results in lapse of membership.
- The Chamber uses e-mail as the preferred mode of communication with our members.

**VOTING MEMBER:** Business or Organization within the 45387 or 45316 zip codes.

**NON-VOTING MEMBER:** Individual Citizen or Business or Organization outside the 45387 or 45316 zip codes.

The Primary Contact Person is the Designated Voting Representative for Voting Members. Please designate an Authorized Voting Alternate.

NAME / TITLE: \_\_\_\_\_

I certify that this information is correct: \_\_\_\_\_ Date \_\_\_\_\_

**Send this application with payment to Yellow Springs Chamber of Commerce, 101 Dayton St., Yellow Springs, OH 45387.**

For CHAMBER Office Use only:	Investment Paid:
MEMBER SINCE: _____	AMOUNT: _____
VOTING MEMBER: Yes _____ No _____	DATE: _____
Welcome Packet Sent ___ Member Decal Provided ___ Added to Website ___ Added to Constant Contact ___ Added to Member List ___	