



MEMBERSHIP APPLICATION

Business Name: _____

Business Address: _____

Office #: _____ Fax#: _____ Business Type: _____

Non-Profit #: _____ # Employees: _____ Year Established: _____

1. Contact Name: _____

Email: _____ Direct/Mobile #: _____

Website: _____ Referral source: _____

2. Contact Name: _____

Email: _____ Direct/Mobile #: _____

Areas of Interest/Committee: _____

Member Discounts/Others (\$/%): _____

Signature: _____ Join Date: _____

INDIVIDUAL MEMBERSHIP

- Individual Entrepreneur - \$150
- Arts Comm. Member - \$75
- Student/Retiree - \$35
- Unemployed - \$0 (Free)

SMALL BUSINESS MEMBERSHIP

- Level I \$250
- Level II \$500
- Level III \$750
- Level IV \$1,000

Non-for-profit organizations and government agencies will receive a 10% discount on the Level II Business Membership. Please contact our office for more information.

FOR OFFICE USE ONLY

Candidate: Accepted Rejected Amount Paid: \$ _____

Referred by: _____ (Membership Representative)