

MEMBERSHIP FORM

— THE GONZALES CHAMBER OF COMMERCE & AGRICULTURE



Business/Organization Name:

Annual Membership Type :

Please indicate the appropriate option for full-time & part-time employees. Payment methods accepted include cash, check, and credit card. Membership dues are non-refundable.

<input type="checkbox"/> Student (13-18 years old) \$25	<input type="checkbox"/> Non-Profit \$150	<input type="checkbox"/> Level IV (100-149 employees) \$800
<input type="checkbox"/> Individual \$75	<input type="checkbox"/> Level I (1-5 employees) \$250	<input type="checkbox"/> Level V (150-199 employees) \$900
<input type="checkbox"/> Family \$125	<input type="checkbox"/> Level II (6-25 employees) \$300	<input type="checkbox"/> Level VI (200+ employees) \$1050
<input type="checkbox"/> Financial Institution \$975	<input type="checkbox"/> Level III (26-99 employees) \$400	

BUSINESS INFORMATION

Representative :

Title :

Business Phone: Cell Phone :

Business Email :

Physical Address :

Postcode : City / Country :

Mailing Address:

Postcode : City / Country :

Website URL :

Social Media Pages :

Please give a brief description of your business:

Public Information Preferences:

Please indicate the information you would like to display in our public directory and promotional materials.

<input type="checkbox"/> Business Name	<input type="checkbox"/> Representative Name	<input type="checkbox"/> Business Phone	<input type="checkbox"/> Cell Phone
<input type="checkbox"/> Business Email	<input type="checkbox"/> Business Description	<input type="checkbox"/> Physical Address	<input type="checkbox"/> Website URL

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Do you want to be contacted about sponsorship opportunities?

 Yes No

Would you be interested in volunteering at the Gonzales Chamber of Commerce and/or other events in the community?

 Yes No

Would you be interested in serving a 3-year term on the Gonzales Chamber of Commerce's Board of Directors?

 Yes No

If you would like to offer a Member to Member Discount, please describe the offer:

Tell us why you want to join the Gonzales Chamber of Commerce:

The signer agrees to annually subscribe \$ towards membership dues for the Gonzales Chamber of Commerce, with renewal scheduled on the same calendar date each year.

Signature: _____ Date: _____

Gonzales Chamber of Commerce & Agriculture
(830) 672- 6532
admin@gonzalestexas.com
304 St. Louis St., Gonzales, TX 78629

For office use only:

Paid via _____ on _____

Added to eChamber

Added to Constant Contact