



## **MEMBERSHIP APPLICATION**

Your membership entitles you to participate in Chamber networking events, be included in the Chamber membership directory/relocation guide, and be a part of our business community. Our 200+ member Chamber covers the area from Semoran Boulevard to Dean Road and Red Bug Road to State Road 50.

Come join our Chamber and become a part of a community rich with history and intrigue! Your membership entitles you to be a part of an organization that truly “does business with its own” and assists in promoting your business in the community.

### **PURPOSE**

The Goldenrod Area Chamber of Commerce exists to enhance the Goldenrod area by uniting, resourcing and promoting our businesses and our community.

### **GOALS AND OBJECTIVES**

Sponsor relevant opportunities for networking, marketing and information.

Inform, equip and mobilize our members and community.

Raise the visibility of our community, chamber and members.

Maintain strong management through a responsible, fiscally-minded staff and board.

Maintain an attractive and functional headquarters.

### **BENEFITS AND SERVICES**

Membership and Relocation Guide listing your business and distributed to 3000 people.

Monthly newsletter informing you of Chamber news.

Monthly breakfast or luncheon meeting sponsored by the Chamber or Chamber member featuring informative guest speakers.

Business After Hours (BAH) events give you an opportunity to meet other Chamber members on a one-to-one basis. Chamber members are invited to host a BAH at their place of business.

Community welfare and interests are protected along with the Chamber helping in the development of Goldenrod.

Special events several times per year promote good will and business among members.

**Membership dues are based on the number of employees as shown below:**

*(Check one plus initiation fee.)*

- |   |                         |
|---|-------------------------|
| <input type="checkbox"/> Initiation Fee       | \$ 25.00 (one time fee) |
| <input type="checkbox"/> Individual/Nonprofit | \$ 60.00                |
| <input type="checkbox"/> 0-10 Employees       | \$120.00                |
| <input type="checkbox"/> 11-19 Employees      | \$180.00                |
| <input type="checkbox"/> 20 + Employees       | \$240.00                |

Type of payment (circle one)      CASH                      CHECK              Amount \$ \_\_\_\_\_

CREDIT: VISA/Mastercard Number \_\_\_\_\_ Expiration Date \_\_\_\_\_

**\*\*Please enclose initiation fee and annual membership in your payment.**

COMPANY NAME \_\_\_\_\_

CONTACT NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_

STATE \_\_\_\_\_ ZIP \_\_\_\_\_

PHONE NUMBER \_\_\_\_\_ FAX \_\_\_\_\_

EMAIL \_\_\_\_\_ WEBPAGE \_\_\_\_\_

TYPE OF BUSINESS \_\_\_\_\_ NO. OF EMPLOYEES \_\_\_\_\_

SIGNATURE \_\_\_\_\_

Office use only:

Sponsored by \_\_\_\_\_ Date \_\_\_\_\_