

Membership Agreement

Please print or type

Date

Company Name	Phone	Fax	
Street Address	City	State	Zip
Mailing Address (If different)	City	State	Zip
Billing Address (If different)	City	State	Zip

We prefer to receive member communications via

Check all that apply Fax E-mail Mail

Note: In compliance with new regulations from the Federal Communications Commission and the State of Tennessee, fax and e-mail solicitations may only be sent with written permission from the recipient. Communications that contain information only are not subject to these guidelines.

Number of full-time employees

Number of part-time employees

Directory Classifications (you may list up to 3)

Primary Company Representative	Title	
E-mail	Phone	Fax

Additional company representatives*

see back for details

Name	Title	
E-mail	Phone	Fax
Name	Title	
E-mail	Phone	Fax
Name	Title	
E-mail	Phone	Fax

The Chamber WORKS

Networking at its Best

- Business After Hours
- Power Breakfasts
- Golf Tournaments
- Women In Business
- Lunch & Learns
- Home & Garden Show

Business Exposure

- Website Listing
- Membership Directory Listing
- Mailing Labels
- Business Referrals
- Sponsorship Opportunities
- Committee Participation
- Member Newsletters

Champion of Small Business

- Seminars & Workshops
- Free Small Business Resources
- Workforce Initiatives
- Credibility
- Legislative Advocacy
- Community/Government Partnerships

Resources

- Demographics & Statistics
- Member Directory
- Member Newsletter
- Manufacturers Handbook
- Steps to Success
- Community Profile
- Image & Information Brochure
- Fast Facts

Is your company owned by another company? Yes No

Is this a minority or female owned company? Yes No

If yes, name of the parent company?

Year your company was established

Does your business have a marquee? Yes No

Website address

Authorizing signature

Sponsor _____ Company _____ Sponsor Phone _____

Reasons for joining the Chamber Check all that apply

- Business Contacts/Networking
- Research/Business Information
- Community/Government Representation
- Marketing Opportunities
- Member Discount Programs & Services
- Other
- Support Economic Development Efforts
- Volunteer Opportunities

Investment levels

Effective July 1, 2011

Level	Number of employees	Investment	Representatives*
Standard	1-10	\$290	1
	11-30	\$370	1
Classic	31-50	\$590	5
	51-75	\$700	10
	76-100	\$845	10
Deluxe	101-200	\$1,090	15
	201-300	\$1,955	15
Presidential	301-400	\$2,310	18
	401+	\$4,240	20

Associate membership is available at an annual investment of \$215 for churches and not-for-profit organizations, as well as retired individuals and those not represented by a business.

An employee is any person employed by a firm. This includes owners, partners, managers, etc. When figuring the number of employees, remember part time employees count two for one.

Each affiliate membership (additional location) is \$215.

Each member is given up to three category listings in both the printed and online membership directories at no additional cost. Additional listings are \$100 each.

*Additional representatives may be added to your membership for \$100 each.

Your Chamber Membership Investment

Investment _____
One-time processing fee _____ \$25
Additional Representatives (\$100 each) _____
Total Investment _____

Note: Membership investments may be tax deductible as ordinary & necessary business expenses, but are not a charitable tax deduction for federal income tax purposes. The Chamber is not a charity, but serves as an advocate organization for area businesses. See your tax advisor.

Method of payment

- Check (payable to Clarksville Area Chamber)
- Please charge my:
 - MasterCard
 - VISA
 - Discover
 - American Express

Name (as it appears on card)

Card Number

Billing Address (If different)

Expiration Date

Signature

Clarksville
AREA CHAMBER OF COMMERCE®

25 Jefferson Street, Suite 300
Clarksville, TN 37040
931-647-2331 fax 931-645-1574
cacc@clarksville.tn.us • clarkvillechamber.com