



# Membership Application

Company Name \_\_\_\_\_ Today's Date: \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

Rep. Name: \_\_\_\_\_ Title: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Rep. Name: \_\_\_\_\_ Title: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Rep. Name: \_\_\_\_\_ Title: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Please provide additional Representatives from your company on a separate document.

Employees (Full Time): \_\_\_\_\_ (Part Time): \_\_\_\_\_ Company Website \_\_\_\_\_

Company Description (that will appear in Chamber newsletter 75 words or less): \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Categories: Primary Category: \_\_\_\_\_ *Primary category is complimentary*

Secondary: \_\_\_\_\_ Tertiary: \_\_\_\_\_

**Secondary & Tertiary Categories \$25 each**

Search Keywords: \_\_\_\_\_

**Search keywords are used for database and online member searches**

I am most interested in the following programs (Circle all that apply):

Speed Networking    Customer Service    Legislative Advocacy    Education    Leadership Academy

Retail Success Academy    JAXPO    Business After Hours    Other: \_\_\_\_\_

The reason (s) you're joining the Chamber (Circle all that apply):

Networking    Insurance    Advertising

Education    Other: \_\_\_\_\_

How did you hear about the Jackson Chamber: \_\_\_\_\_

Other businesses who should join the Jackson Chamber? \_\_\_\_\_



# MEMBERSHIP DUES

Membership dues are divided into the categories listed below.

## BASIC BUSINESS\*\*

(manufacturing, retail, service, amusement, auto sales, construction, printing, publishing, media, transportation, employment agencies, banks, churches, nursing homes, apartment complexes, schools, universities, hotels, motels, etc.)

# of Employees	Dues	# of Employees	Dues
Owner +4	\$275	91-100	\$595
6-10	\$285	100-150	\$695
11-20	\$310	151-200	\$795
21-30	\$345	201-300	\$945
31-40	\$375	301-400	\$1125
41-50	\$410	401-500	\$1330
51-60	\$435	501-600	\$1530
61-70	\$475	601 +	
71-80	\$505		
81-90	\$540		

**\*\* Two part-time or two contract employees equal one full-time employee**

*Business members with greater than 600 employees will work with Membership Coordinator to establish annual membership dues investment.*

**Individual Associate**  
 (Real Estate Agent, Mortgage officers, Financial planners, Politicians, Non-business)  
**\$150**

**Restaurants, Nightclubs, Bars**  
 Restaurant with 50 or fewer seats **\$275**  
 Restaurant with 51 or more seats **\$275 + \$2/seat**

**Non-Profit**  
**\$250**

**Student / Retiree**  
**\$50**

**Branch Membership**  
 The Jackson County Chamber of Commerce offers a branch rate for additional locations by the same name or in the same industry with common ownership if the business elects to have other locations listed with the Chamber (directory, mail delivery, web, etc.). No discounts are allowed for membership sold to multiple businesses of difference industries with a single owner. Branch rate is negotiated with the Membership Coordinator.

## YOUR MEMBERSHIP DUES INFORMATION

Annual Dues \$ \_\_\_\_\_ + Optional Additions \$ \_\_\_\_\_ Total Amount Due: \$ \_\_\_\_\_

*Optional Additions: Name Badge \$10 / Enhanced Web Listing \$30 / Additional Categories \$25 each / Monthly Debit fee \$36.00*

Payment Options (circle): *Annual Payment    Semi-Annual Payment    Monthly Debit\**

*\*Card number on file is required for monthly debit. Card will be billed on the 15th of each month. \$3 per month fee for monthly payments.*

Method of payment (circle): Cash    Check    Credit Card: *MasterCard    Visa*

Credit Card Number: \_\_\_\_\_ Exp. Date: \_\_\_\_\_

Address Card is Billed to: \_\_\_\_\_

City: \_\_\_\_\_ Zip: \_\_\_\_\_ Security Code: \_\_\_\_\_

Cardholder Name: \_\_\_\_\_

Cardholder Signature: \_\_\_\_\_