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**Membership Application**

We are delighted that you are interested in joining the Chesapeake Gateway Chamber of Commerce. Being an active member is the best way to obtain the most value from your investment. We welcome your ideas and your support. Upon receiving your application and payment, we will send you a new member packet. Please print information on application. This form also is available online at www.chesapeakechamber.org.

Company Representative

Prefix: \_\_\_\_\_\_\_ First Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Last Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Suffix: \_\_\_\_\_\_\_

Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Company Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Years in Business: \_\_\_\_\_

Address (physical): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Zip+4: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Work Phone:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cell: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (check here \_\_\_\_ if okay to publish cell number)

Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Website: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Business (Yellow Page) Classification: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Description of your business: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

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

Hours of operation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Check all that apply:

\_\_\_\_\_ Home-based \_\_\_\_\_ Small Disadvantaged \_\_\_\_\_ Disability-owned

\_\_\_\_\_ Branch \_\_\_\_\_ Minority-owned \_\_\_\_\_Green Certified

\_\_\_\_\_ Headquarters \_\_\_\_\_ Woman-owned \_\_\_\_\_ Enterprise Zone

\_\_\_\_\_ 8(a) \_\_\_\_\_ Veteran-owned \_\_\_\_\_ Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Do we have your permission to use the information listed above and your photo from participation in Chesapeake Gateway Chamber activities in affiliated publications, and on our website and social media pages? \_\_\_\_\_ Yes \_\_\_\_\_ No

By joining the Chesapeake Gateway Chamber, you are authorizing the Chamber to communicate with you via email regarding events, membership dues and other transactions to facilitate your membership benefits.

Preferred Method(s) of Communication:

Email \_\_\_\_\_ Chamber Website \_\_\_\_\_ Social Media \_\_\_\_\_\_ Mail \_\_\_\_\_\_\_\_ Phone \_\_\_\_\_\_\_\_ Fax \_\_\_\_\_\_\_\_\_\_

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Reasons for joining:

\_\_\_\_\_ Networking \_\_\_\_\_ Advocacy \_\_\_\_\_ Training/Skill Building \_\_\_\_\_ Publicity & Exposure

\_\_\_\_\_ Community/School Support \_\_\_\_\_ Other (please explain) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

How did you hear about us? \_\_\_\_\_ Website \_\_\_\_\_ Social Media \_\_\_\_\_ Attended Event

 \_\_\_\_\_ Current Member (enter name here) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_ Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

One of the best ways to get the most from your membership is by joining a committee.

Please indicate your area(s) of interest:

\_\_\_\_\_ Membership \_\_\_\_\_ Programs \_\_\_\_\_ Legislative Affairs \_\_\_\_\_ Public Relations & Marketing

Membership Investment:

Dues cover one year from the date your application and payment are received.

\_\_\_\_\_ Individual (no company affiliation) - $75 \_\_\_\_\_ 51-100 Employees - $450

\_\_\_\_\_ Sole Proprietor - $175 \_\_\_\_\_ 101-250 Employees - $600

\_\_\_\_\_ 2-5 Employees - $225 \_\_\_\_\_ 251-500 Employees - $750

\_\_\_\_\_ 6-15 Employees - $250 \_\_\_\_\_ 501+ Employees - $900

\_\_\_\_\_ 16-30 Employees - $275 \_\_\_\_\_ Non-Profit Organizations - $150

\_\_\_\_\_31-50 Employees - $300

Please consider participating in our sponsorship program, which provides additional opportunities for visibility and support for the community and the Chamber. \_\_\_\_\_\_\_ Contact me about these opportunities.

Billing Contact (if different from above): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Billing/Mailing Address (if different from above): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State: \_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_ Zip+4: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Amount enclosed: \_\_\_\_\_\_\_\_\_\_ Method of Payment: \_\_\_\_\_ Check enclosed

Charge to my: \_\_\_\_\_ Visa \_\_\_\_\_ MasterCard \_\_\_\_\_ Discover \_\_\_\_\_ American Express

Account #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Expiration Date: \_\_\_\_\_\_\_ Security Code: \_\_\_\_\_\_\_\_

Name as it appears on card: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address where credit card statement is received: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Greenleigh at Crossroads

405 Williams Court, Suite 108, Baltimore, MD 21220

Phone: 443.317.8763 Fax: 443.317.8772

Email: info@chesapeakechamber.org Website: www.chesapeakechamber.org