

GET STARTED NOW!

COMPANY PROFILE

- Please Fill Out Completely -

NUMBER OF EMPLOYEES: FULL TIME _____ PART TIME _____

Chamber benefits are available to every employee at your location.

A Non-Profit 501c3 Company must include a valid copy of their 501c3 tax exempt status letter and will receive a 20% discount.

Full Name of Business _____

Street Address _____

City _____ State _____ Zip _____

Main Phone Number _____ Fax _____

Primary Contact Name and Title _____

(Please list additional representatives on next page)

E-Mail Address _____ Direct Telephone Number _____

President/CEO Name _____ Email _____

Vice President/Executive _____ Email _____

Company Web Site Address _____

Business Description (4-5 sentences) _____

Company Established Date _____ Referred By _____

****A logo is to be provided in a JPG or TIF format by email upon submittal of this application to Lisa@mhcc.com. ****

Payment: (Please make checks payable to Maryland Heights Chamber of Commerce)

_____ Check (check no. _____) _____ Mastercard _____ Visa

Credit Card # _____ Expiration Date: _____

The above mentioned hereby makes application for membership in and agrees to pay to the Maryland Heights Chamber of Commerce \$ _____ annually **plus a one time \$25.00 application fee** effective (today's date) _____.

* *Pro-rated renewal invoices will be mailed in November and are due in January in order to maintain an active status.*

* Initial dues required upon submission of application.

* By joining the Maryland Heights Chamber of Commerce and paying annual dues, you agree to receive faxes and e-mails distributed by the Maryland Heights Chamber of Commerce unless otherwise notifying the Chamber.

Referral Program - Refer a friend and receive a complimentary Chamber Luncheon to be redeemed after new member application is submitted. You will also be mentioned at the time when they are featured at the Luncheon.

PLEASE CONTACT: _____ COMPANY: _____ PHONE: _____

Thank you for helping your Chamber grow.

COMPANY PROFILE (Cont'd)

Email reminders and important business updates are distributed on a regular basis.
Feel free to add as many representatives as needed.

Additional Representative Name and Title _____

E-Mail Address _____ Telephone _____ Fax _____

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E-Mail Address _____ Telephone _____ Fax _____

Additional Representative Name and Title _____

E-Mail Address _____ Telephone _____ Fax _____

We appreciate notification of any contact information changes in order to keep our database correct and up to date.