



# Membership Application

**Organization Name** \_\_\_\_\_

Address \_\_\_\_\_

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

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

Home/Toll Free Phone \_\_\_\_\_ Mobile Phone \_\_\_\_\_

Main Point of Contact Name \_\_\_\_\_

Main Point of Contact Email \_\_\_\_\_

Other contacts who should receive Chamber emails \_\_\_\_\_

\_\_\_\_\_

Do you want to receive Chamber emails?  Yes  No

Website \_\_\_\_\_

Facebook \_\_\_\_\_

What category best describes your business \_\_\_\_\_

**Are you?**

Veteran-owned  Woman-owned  Minority-owned  Service-Disabled-owned

Franchise-Locally-owned  Corporate-owned  Locally-owned

Number Employees \_\_\_\_\_ Additional locations? \_\_\_\_\_

**Interested in Chamber committees?**

Ambassadors  Business Women's Alliance (BWA)  Governmental Affairs

Retired Executive  Special Events  Transportation & Environmental

Young Professionals

### **Additional Services**

Select any you want to know more about:

Sponsoring a luncheon

Sponsoring a mixer

Sponsoring a festival or parade

Exhibiting at an event

Web advertising such as banner ads or box ads on the Chamber website

Online business directory enhancements such as top of category or social media upgrades

Membership list with contact information

### **Annual Membership Dues**

Select one

- |   |         |
|---|---------|
| <input type="checkbox"/> Associate (non-business) | \$125   |
| <input type="checkbox"/> Additional Location      | \$100   |
| <input type="checkbox"/> Nonprofit                | \$155   |
| <input type="checkbox"/> 1 to 4 employees         | \$225   |
| <input type="checkbox"/> 5 to 9 employees         | \$275   |
| <input type="checkbox"/> 10 to 24 employees       | \$395   |
| <input type="checkbox"/> 25 to 39 employees       | \$595   |
| <input type="checkbox"/> 40 to 74 employees       | \$795   |
| <input type="checkbox"/> 75 to 99 employees       | \$1,200 |
| <input type="checkbox"/> Restaurant – Small       | \$250   |
| <input type="checkbox"/> Restaurant – Large       | \$375   |
| <input type="checkbox"/> Restaurant – Franchise   | \$575   |

### **Payment Info**

Click here if you are submitting a check \_\_\_\_\_

Credit Card Type  Visa  MasterCard

Name on Card \_\_\_\_\_

Credit Card # \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Expiration Date \_\_\_\_\_

Security Code \_\_\_\_\_ Billing Address if different from above \_\_\_\_\_

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*Return applications to:*

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#### **Citrus County Chamber Offices:**

915 N. Suncoast Blvd. Crystal River, FL 34429

352-795-3149 (Fax) 352-795-1921

106 W. Main Street, Inverness, FL 34450

352-726-2801 (Fax) 352-637-6498

#### **Chamber Staff Emails:**

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