



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 _____

Return applications to:

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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