



## MEMBERSHIP APPLICATION

**Business or Individual:** \_\_\_\_\_

**Contact Person:** \_\_\_\_\_

**Mailing Address:** \_\_\_\_\_

**City:** \_\_\_\_\_

**State:** \_\_\_\_\_

**Zip Code:** \_\_\_\_\_

**Telephone:** \_\_\_\_\_

**Fax:** \_\_\_\_\_

**E-Mail Address:** \_\_\_\_\_

**Web-Site Address** \_\_\_\_\_

**# Full Time Employees:** \_\_\_\_\_

**Business Classification:** \_\_\_\_\_

**Annual Chamber Dues:** \_\_\_\_\_

**New Member Signature:** \_\_\_\_\_

**New Member Sponsor:** \_\_\_\_\_

### MEMBERSHIP INVESTMENT SCHEDULE

NUMBER OF FULL-TIME EMPLOYEES ~ OTHER MEMBERSHIPS ~	FEE
1-5	\$150
6-12	\$175
13-24	\$250
25-49	\$325
50-99	\$450
100+	\$550
Retired Individuals Not Representing A Company	\$75
Churches and Civic Organizations	\$100
New Membership Processing Fee	\$35
Permanent Membership Name Tag	\$8

Second Year  
Membership Is  
Pro-Rated

Please complete your application and submit with payment to:

**Debbie Pace, President**

**Madison-Rivergate Area Chamber of Commerce**

**P.O. Box 97 \* Madison, TN 37116-0097**

*Make check payable to: Madison-Rivergate Area Chamber of Commerce*