



DATE: _____

Membership Application

Company Name:		
Primary Phone:		
Physical Address:		
City:	State:	ZIP Code:
Mailing Address (if different from above):		
City:	State:	ZIP Code:
Web Site:		
Primary Contact, Title:		
Address:		
Phone:	E-mail:	
City:	State:	ZIP Code:
Additional Contact, Title:		
Address:		
Phone:	E-mail:	
City:	State:	ZIP Code:
ADDITIONAL INFORMATION		
Full Time Employees:	Date Founded:	
Part Time Employees:	Professional Employees (Doctors, Attorneys, etc):	
Directory Category:		
PAYMENT INFORMATION		
Base Investment	\$330.00	
# of FT Employees ____ x \$8.30*	_____	
# of PT Employees ____ x \$5.00*	_____	
One-Time Administrative Fee	\$ 40.00	
Total Investment	_____	
Circle One: MasterCard / VISA		Check #
Card Number:		Exp. Date:
Billing Address:		Back Panel Code:
City/State:		

Remit to: COLUMBUS AREA CHAMBER OF COMMERCE 500 FRANKLIN STREET COLUMBUS INDIANA 47201
www.columbusareachamber.com

*Rates vary depending on business type. See reverse side for details.

Membership Investment Schedule

<u>Category</u>	<u>Investment Amount</u>
APARTMENTS	\$330 for 1-50 units \$355 for 50-100 units \$455 for 100-200 units \$525 for over 200 units
BUSINESS AND CONSUMER SERVICES	\$330 + \$8.30 per full-time employee \$5.00 per part-time employee
COMMERCIAL BANKS & CREDIT UNIONS	\$530 Base includes first \$10 million of in-county deposits Plus \$30.00 per million \$11M-\$50M of in-county deposits Plus \$13.00 per million over \$50M of in-county deposits
HOTELS AND MOTELS	\$330 + \$8.30 per room
INSURANCE & REAL ESTATE AGENTS – FINANCIAL ADVISORS & BROKERS	\$330 + \$44 per agent
MANUFACTURERS	\$330 + \$5.00 per employee
SOCIAL SERVICE NOT-FOR-PROFITS	\$330
PROFESSIONALS	\$330 + \$85 per professional