

Clay-Pinson Chamber of Commerce

Membership Application

Company Name: _____

Contact Name: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Fax: _____

Email: _____ Website: _____

Principle/Owner: _____

Number of Full Time Employees at all locations: _____

Annual Membership: (please circle one that applies)

Individual Membership (no company)		\$50.00
Senior Citizens (over 60 years old)		\$25.00
Business Membership (all locations)	1-20 employee's	\$125.00
	21-50 employee's	\$150.00
	51-100 employee's	\$175.00
	101 + employee's	\$200.00
Non-Profit Organizations		\$100.00
Associate Membership (Real Estate Agents)		\$50.00

Signature of Applicant: _____

Title: _____ Date: _____

Please fill out entire application including Company information and emails. This will be the information that goes on the website listings and should reflect street address along with phone number and website (if available). Mail the completed application, with a check made out to **Clay-Pinson Chamber of Commerce, to Post Office Box 26, Clay Alabama 35048**. You may also bring it to the next chamber meeting, or email the application to info@claypinsonchamber.com. All of the Chamber meeting information is available on the events page of the website at www.claypinsonchamber.com

Thank You - Clay-Pinson Chamber Welcomes You as a Partner