



Membership Application

Connect, Succeed and Prosper.

E-mail: staff@dccchamber.org

Tel: (650) 755-3900 www.dccchamber.org

Fill out all information completely. Please print clearly.

Please mail completed application with your check made out to Daly City/Colma Chamber of Commerce to

Daly City/Colma Chamber of Commerce 362 Gellert Blvd., Daly City, CA 94015.
If paying with credit card, please **SEND** completed form to staff@dccchamber.org.

BUSINESS NAME _____

Mr. Ms.
 Other

FIRST NAME LAST NAME SUFFIX (MD, PhD, MA, LMT, JR, ETC.)

TITLE _____

BUSINESS ADDRESS _____ APT/SUITE _____

CITY _____ STATE _____ ZIP _____

Please check here if the above is a residential address.

ESTABLISHED DATE _____
Yes

BUSINESS TYPE/CATEGORY _____ NON-PROFIT ORGANIZATION?

MAIN PHONE () _____ EXTENSION _____

FAX () _____

MOBILE () _____

OTHER () _____

EMAIL _____

WEBSITE ADDRESS _____

HOW DID YOU LEARN ABOUT THE CHAMBER? _____

I AM INTERESTED IN VOLUNTEERING Yes No

SELECT YOUR MEMBERSHIP FEE: First Year Dues are \$99.00 with a 2-year commitment. After the special introductory rate the membership investment fee will increase to the standard membership rates.

- | | |
|--|---|
| <input type="checkbox"/> \$ 195.00 1 to 5 | <input type="checkbox"/> \$1,100.00 Major Employer 150+ |
| <input type="checkbox"/> \$ 275.00 6 to 10 | <input type="checkbox"/> \$ 115.00 Home Base Business (1 Employee) |
| <input type="checkbox"/> \$ 350.00 11 to 20 | <input type="checkbox"/> \$ 115.00 Non-Profit Organizations \$115.00 |
| <input type="checkbox"/> \$ 500.00 21 to 50 | <input type="checkbox"/> \$ 115.00 Associate Member (non-voting reserved for civic, education, or retired Business leaders) |
| <input type="checkbox"/> \$ 625.00 51 to 150 | <input type="checkbox"/> Chairman's Circle email staff@dccchamber.org |

\$ _____ Membership Investment (from above) Method of Payment: Check or Money Order Visa Mastercard AMEX

CARD NUMBER _____ EXPIRATION DATE _____
(if CC billing address is different from above, please provide)

NAME AS IT APPEARS ON CARD _____ CCV/CCID _____ ZIP _____

Application/Payment Endorsement

X _____ DATE _____

SIGNATURE

I authorize the Daly City/Colma Chamber of Commerce to charge the amount listed above to the credit card provided herein. I agree to pay for this purchase in accordance with the issuing bank cardholder agreement. Dues are subject to the approval of the Board of Directors and may be a TAX DEDUCTIBLE item. Membership shall be continuous unless canceled by written resignation. I authorize the Chamber to email me regarding Chamber membership benefits, invoices, economic, and business news. I authorize the Chamber to publish my name, photo and/or business information in the Chamber's newsletter, online directory, print directory, and other publications.

- On occasion the Chamber allows limited one-time use of our member/contact information to certain community organizations as a services to our Members and our community.
Please check here if you do NOT want your information included.

Membership Applications are subject to administrative and/or Board approval.

MEMBER DEMOGRAPHICS*

EMPLOYEES / SALES

EMPLOYEES (Full-time equivalent): _____

GROSS RECEIPTS/ANNUAL SALES: _____

BUSINESS STATUS (if applicable) Certified? Please list.

<input type="checkbox"/> B CORP OWNED	<input type="checkbox"/> _____
<input type="checkbox"/> LGBT OWNED	<input type="checkbox"/> _____
<input type="checkbox"/> MINORITY OWNED	<input type="checkbox"/> _____
<input type="checkbox"/> WOMAN OWNED	<input type="checkbox"/> _____
<input type="checkbox"/> OTHER _____	<input type="checkbox"/> _____

Business must be owned, operated and controlled by individual or group indicated above who have at least 51% ownership.

* Demographic information is requested to assist us in measuring our organizational diversity. This information is not used in connection with your membership; it is for internal use by the Chamber.

I'm Interested in:

- Red Ribbon Cutting
- Publications
- Networking
- Economic Development
- Marketing & Visibility
- Scholarship / Youth
- Business Advocacy
- Connecting & Learning
- Other _____

Submit completed application to the Chamber office via one of the methods below:

Mail:

Daly City Colma Chamber of Commerce
362 Gellert Blvd
Daly City, CA 94015

Email:

staff@dccchamber.org