



Please return your application and payment to:
 Gloucester County Chamber of Commerce • 28 N. Main Street • Glassboro, New Jersey 08028
 If you have questions, please call 856-881-6560

MEMBERSHIP APPLICATION - Company Information

Full Company Name: _____
 Name: _____ Title: _____
 Additional Contact Persons Name: _____ Title: _____
 Address: _____
 Phone: _____ Fax: _____
 E-mail: _____ Web site: _____
 Number of full-time employees: _____ Number of part-time employees: _____
 Type of Business: _____
 How did you hear about us? Chamber Website Chamber Member Chamber Event Newspaper Other
 Describe: _____

Membership Investment Options (Check One)

<u>Business Class</u>	<u># of Employees</u>	<u>Amount</u>	<u>Non-Profit Class</u>	<u>Amount</u>
<input type="checkbox"/> Small	(0-5)	\$200	<input type="checkbox"/> Service Organization	\$200
<input type="checkbox"/> Medium	(6-10)	\$250	<input type="checkbox"/> Hospital & Colleges	\$600
<input type="checkbox"/> Large	(11-50)	\$350	<input type="checkbox"/> Government Entities	\$200
<input type="checkbox"/> Corporate	(51-99)	\$500	(City, County, State)	
<input type="checkbox"/> Industry	(100 + or more)	\$600		

One Time Application Fee of \$25

Application Amount \$ _____ + \$25.00 Application Fee = Total Enclosed \$ _____

Chamber Office Use Only:

Date Submitted: _____ Date Added to Web site: _____
 Effective date: _____ Expiration date: _____
 Payment Information: Check Purchase Order Pay Pal Referred By: _____