

MEMBERSHIP APPLICATION 2011

Crockett Chamber of Commerce

P. O. Box 191 - Crockett, California 94525 - Tel: 510-787-1155

Celebrating 30 years serving our Business Community



MEMBERSHIP INFORMATION:

New Member

Existing Member

Business name: _____

Name of Owner: _____

Designated Representative: _____

Business Address: _____

Mailing address: (if different) _____

Business Phone: _____

Business Fax: _____

Email: _____

Web page: _____

Type of Business: _____

Hours and days of operation: _____

DIRECTORY INFORMATION:

Business name: _____

Category (ie Art, Restaurant, etc): _____

Address: _____

Business Phone: _____

Hours (if applicable): _____

Email: _____

Website: _____

Up to 15 words describing your business for the directory: _____

*We will print exactly what you have in the Directory Information area only, so **PLEASE** be sure it is worded to your liking.*

DUES:

Individual Business Membership \$80

Associate Member \$25

Small Business Membership (10 employees or more) \$250

Student Member \$10

Corporate Membership \$2000

Senior Member (Age 55+) \$10

Please make checks payable to the Crockett Chamber of Commerce and mail checks to P. O. Box 191, Crockett, CA 94525.

I am interested in promoting my business in the Crockett Chamber of Commerce Directory

Y

N

I am interested in helping with the following projects: (Please circle any/all you are interested in)

Ambassador

Business Fair

Business Mentor

Downtown Holiday Festival

Holiday Dinner / Toy Drive

Mixer/Host

Revitalization of Crockett Committee (ROCC)

Zombie Hotel Haunted House

Town Wide Yard Sale

Sugartown Festival & Street Faire

Promotion of Events

Other _____

Fee: _____ Date paid: _____ Check # _____ Rec'd by: _____