

MEMBERSHIP APPLICATION

BUSINESS INFORMATION:			
COMPANY NAME:			
PRIMARY CONTACT:	TITLE:	EMAIL:	
BILLING ADDRESS:	CITY:	STATE:	ZIP:
BUSINESS ADDRESS:	CITY:	STATE:	ZIP:
PHONE:()	_COMPANY WEBSITE	:	
KEY SEARCH WORDS FOR MEN	MBER DIRECTORY (WF	RITE-IN FOUR):	
1; 2	; 3	; 4	
COMPANY SOCIAL MEDIA HAN	DLES:		
FACEBOOKIN	NSTAGRAM	LINKEDIN	

MEMBERSHIP FEES

ANNUAL DUES

Food Truck		\$175.00
1-4	Full-Time Employees	\$325.00
5-10	Full-Time Employees	\$400.00
11-25	Full-Time Employees	\$450.00
26-50	Full-Time Employees	\$550.00
51-100	Full-Time Employees	\$700.00
101-500	Full-Time Employees	\$850.00
501-1,000	Full-Time Employees	\$1,250.00
1,001-2,000	Full-Time Employees	\$1,500.00

OTHER

Ribbon Cutting Fee	\$150.00
One-Time Only Admin Fee	\$50.00*

*Add this amount to your total.

ADDITIONAL LISTINGS

1 Additional Listing	\$200.00
5+ Additional Listings	\$150.00 (per listing)

MEMBERSHIP DIRECTORY

PLEASE SELECT ONE:

Advertising, Marketing, Media	Industrial Supplies & Service
Arts, Culture, & Entertainment	Legal
Automotive & Marine	Lodging & Travel
Business & Professional Services	Personal Services & Care
Computers & Telecommunication	Pets & Veterinary
Construction Equipment & Contractors	Real Estate, Moving & Storage
Family, Community & Civic Organization	Religious Organizations
Finance & Insurance	Restaurants, Food & Beverage
Government, Education & Individuals	Shopping & Specialty Retail
Healthcare	Sports & Recreation
Home & Garden	Transportation

DIRECTORY INFORMATION: KEY SEARCH WORDS FOR MEMBER DIRECTORY (WRITE-IN FOUR): 1._____; 2._____; 3. _____; 4. _____ COMPANY SOCIAL MEDIA HANDLES: FACEBOOK INSTAGRAM LINKEDIN **PAYMENT INFORMATION:** PAYMENT METHOD: CHECK[] VISA[] MASTERCARD[] AMEX[] DISCOVER[] CREDIT CARD NO.:_____EXP. DATE:____CVV:_____ BILLING ADDRESS: CITY: STATE: ZIP: **IS YOUR BUSINESS AT LEAST 51%:** ☐ Alaskan Native Owned □ Veteran Owned ☐ 501(c)(3) ☐ Employee Owned □ Woman Owned ☐ Other Nonprofit ☐ Foreign Owned ☐ exporter ☐ Disadvantaged Small Business ☐ Minority Owned ☐ Importer ☐ Disadvantaged Buiness ☐ Native American Owned □ HUBZone Enterprise ☐ Service Disabled Veteran Owned ☐ SBA Certified 8(a)

TOTAL AMOUNT DUE: _____

SIGNATURE: