



2009 Membership Agreement

THE GREATER SPRINGFIELD CHAMBER OF COMMERCE

3 S. OLD STATE CAPITOL PLAZA SPRINGFIELD, IL 62701

T 217.525.1173 F 217.525.8768

www.gscc.org



COMPANY INFORMATION

Company Name _____

Number of Employees _____ Full Time _____ Part Time _____

Business Category _____

(Businesses can be listed under a maximum of 5 categories. One is included with membership; others can be added for \$20 per category.)

For a complete list visit www.gscc.org and click on 'Business Directory', then 'List All Categories' link.

PHYSICAL ADDRESS

Line 1 _____

Line 2 _____

City _____ State _____ Zip _____

MAILING / BILLING ADDRESS (IF DIFFERENT THAN PHYSICAL)

Line 1 _____

Line 2 _____

City _____ State _____ Zip _____

Web site _____ General Business Phone _____

General Business Email _____ General Business Fax _____

MAIN CONTACT INFORMATION

Mr. Ms. Name _____

Title _____ Phone _____ Ext _____

Email _____ Cell Phone _____

LIST ADDITIONAL EMPLOYEES TO RECEIVE CHAMBER INFORMATION BY EMAIL

Mr. Ms. Name _____

Phone _____

Title _____

Email _____

Mr. Ms. Name _____

Phone _____

Title _____

Email _____

REASONS FOR JOINING

What is the main reason or reasons that you're joining The Chamber? _____

How did you hear about The Chamber? (check all that apply) Radio Newspaper TV Internet Ambassador

Chamber member Previously a member Other _____

INVESTMENT INFORMATION

Payment Type (please check one):

Cash Money Order Check No: _____

Credit Card (please check one):

American Express* Discover MasterCard VISA

Card #: _____

Exp. Date: _____ 3-Digit Code on back of card: _____

* American Express requires 4-Digit Code on front of card: _____

Annual Dues \$ _____

Processing Fee \$ 25.00

Add'l Categories \$ _____

Advantage Pkg. \$ _____

Total Paid \$ _____

For tax purposes, your membership dues are a necessary and ordinary business expense, not a charitable contribution.

Sponsored by _____