CHARLESTON CHAMBER OF COMMERCE & TOURISM 2017 MEMBERSHIP APPLICATION

Please complete the application and return it with your membership dues to:

Charleston Chamber of Commerce & Tourism 110 South Main St Charleston, MO 63834

Membership Name:		-
Mailing Address:		_
City:State:	Zip:	
Physical Address (if different)		_
City:State:	Zip:	
Contact Individual:		_
Phone:		
Email Address:	(email update	es provided when given)
Membe	ership Fee Schedule	
Individuals, Clubs, and Organizations		\$50
New Individuals, Clubs, and Organizations (Introductory Price	ing)	\$30
New Businesses (Introductory Pricing)		\$60
Businesses (1 – 5 employees)		\$75
Businesses (6 – 10 employees)		\$150
Businesses (11 - 20 employees)		\$300
Businesses (21+ employees)		\$450
Professionals (Doctors, Attorneys, Insurance and Real Estate	Agents)	\$150
Financial Institutions, Major Corporations		\$500
Would you assist with the Dogwood-Azalea Festival?	(Yes or no & how)	
Would you assist with the Christmas Parade?	(Yes or no & how)	
Would you assist with fundraisers ?	(Yes or no & how)	

What, if any, further financial contributions are you willing to make?

		Monthly, Quarterly, Annually, 1 Time	
Museum Fund	Any	Payable ()*	Write in your pledge \$
Petting Zoo Fund	\$250/year	Payable March 1	
Dogwood-Azalea Fund	Any	Payable ()*	Write in your pledge \$
Advertising Fund	Any	Payable ()*	Write in your pledge \$
Operating Fund	Any	Payable ()*	Write in your pledge \$

Thank you for your consideration but most of all, *thank you for your support!*

^{*} Pledges on a monthly, quarterly, annual, or one-time only basis are sincerely appreciated and will be invoiced.