

Membership Application

Business Name _____ Date _____

Contact Name _____

Mailing Address _____

City _____ State _____ Zip Code _____

Physical Address (if different from mailing address) _____

Telephone _____ Fax Number _____

Email Address _____

Website _____

Brief Description of business/organization (25 words or less)

Dues Investment \$ _____

Industry _____

Number of employees _____

Payment Method (Check one)

☐ Annual ☐ Semi-Annual ☐ Quarterly ☐ Monthly (auto withdrawal)

Card Number _____ Exp Date _____

Signature _____ Date _____

I am interested in finding more about the following committees/taskforces:

___ Agriculture ___ Ambassadors ___ Blue Blazers ___ Sports Committee

___ Golf Tournament ___ Government Affairs ___ Leads ___ Salesperson's Breakfast

___ Destination Marketing ___ Issues Task Groups (Energy, Taxation, Healthcare,
Transportation/Managed Growth, Energy, Tourism)