

Mark West Area Chamber of Commerce



*Bringing Business and the
Community Together*

Membership Application

Join the Chamber at any time. Renewals take place annually. An invoice for your next year's membership will be sent to you 30 days before it is due and you can make your payment online at; www.markwest.org.

☐ Basic Membership

1-5 Employees \$149
6-10 Employees \$229
11+ Employees \$299

- Plaque
- Website listing
- Ribbon cutting
- Advertising opportunities on web and in print
- Monthly networking opportunities
- Member pricing for Community Faire booths

☐ Corporate Membership \$749

- All Basic benefits
- Sponsor recognition on web and social media, as well as at monthly socials and events
- Business card-sized ad in newsletter
- 8' Community Faire booth
- Community Faire bag-stuffer

☐ Platinum Sponsor Membership \$2499

- All Basic benefits
- Platinum Sponsor recognition on website and social media, in all event advertising and promotional materials, and at all events
- Half-page advertising in newsletter
- Community Faire sponsorship recognition, including all promotional materials and advertising
- 16' Community Faire booth and bag-stuffer

☐ Individual Membership \$99

Individuals may join with no business affiliation.

☐ Non-profit Membership

Organizations with 501(c)(3) status may join with a 10% discount off Basic Membership pricing.

Business Information

Business Name: _____

Date established: _____ Number of employees including owners: _____

Street Address: _____

City: _____ ZIP: _____

Mailing Address: _____

City: _____ ZIP: _____

Business Phone: _____

Business Email: _____

Website: _____

Business Categories for Membership Directory:

Select from existing categories (see website directory) or suggest a new one for your business. First & Second Category are FREE.

1. _____ 2. _____

Contact Name 1: _____

Title: _____

Phone: _____ Cell: _____

Email: _____

Contact Name 2: _____

Title: _____

Phone: _____ Cell: _____

Email: _____

Referred by: _____

Business Description: Please provide a description of your business (up to 500 characters) for your website listing. Email your description and a logo file in any format to office@markwest.org.

We, (I), as the firm or individual indicated above, hereby make application for membership in the Mark West Area Chamber of Commerce and agree to abide by the Bylaws of the Chamber.

Signature: _____

Please indicate your interest in:

- ☐ Ribbon Cutting
- ☐ Hosting a Business After Hours Social
- ☐ Monthly Advertising in the Lark
- ☐ Serving on the Ambassador Team
- ☐ Serving on the Community Faire Committee

Payment Information

Thank you for your support! Your Chamber investment is non-refundable and normally tax deductible as a legitimate business expense.

We are a 501(c)(6) organization. Fed EIN 68-0004091

Total Enclosed: \$ _____

Type of Payment:

☐ CC#: _____

Name on CC: _____

Billing address: _____

Exp. Date: _____ CVC: _____

☐ Check #: _____ Date: _____

☐ Look for my online payment at markwest.org/payment

If we can help in any way, please call us!

Mark West Area Chamber of Commerce

422 Larkfield Center #128, Santa Rosa, CA 95403

office@markwest.org