



Mansfield Area Chamber of Commerce Application for Membership

Business Name			
Primary Representative Name (1 per membership)			
Primary Representative Cell Phone Number			
Primary Representative email Address			
Business Address (include City and Zip Code)			
Billing Representative email Address			
Billing Contact (if different than above)			
Billing Address (if different than above)			
Telephone:		Fax:	
Facebook Page Title			
Website link - \$25.00 yearly (optional)			
Business Category (2 provided at no charge; additional listings \$10.00 yearly)			
Number of Employees		Year Organized	
Date Joined			
Sponsor/Referral (if applicable)			
How did you hear about us?			

I, hereby apply for membership in the Mansfield Area Chamber of Commerce, for which I agree to invest the sum of:

- \$ _____ Annual Membership Fee (per investment schedule), payable at time of application submission, 12-month renewal from date accepted.
- \$ 25.00 Administration Fee (a one-time fee).
- \$ _____ Website link (optional), \$25.00 (annual fee).
- \$ _____ Additional Areas of Involvement: Referral Groups \$60.00 and/or Women's Division Dues \$75.00.
Note: Requires additional applications and dues are annual, January-December.
- \$ _____ Ambassador Dues, \$200.00 (a one-time fee for Jacket, etc.). Requires additional application.
- \$ _____ **Total Due. NOTE: Dues are Non-Refundable.**

Method of Payment:

_____ Check or _____ Cash or Credit Card: _____ MasterCard _____ VISA _____ Discover _____ AMEX
Card No. _____ Expires _____ 3 Digit Code _____ Zip Code _____

If elected to membership, I agree to abide by the by-laws for the Organization. I understand that membership is continuous, until I resign in writing. Membership dues in the Chamber of Commerce may be tax deductible as an ordinary and necessary business expense. Dues paid to the Chamber are not a charitable tax deduction for federal income tax purposes. Please refer to your tax consultant.

PRINT NAME _____ SIGNATURE _____