



MEMBERSHIP APPLICATION

A vibrant community for business success!

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MEMBERSHIP INFORMATION (As it will appear in the membership directory and website)

FIRM NAME _____
 Address _____
 City _____ State _____ Zip _____
 Phone _____ Fax _____
 E-mail _____
 Website _____
 Company Rep _____ Title _____

Official Use Only

Date Rec'd _____
 Payment \$ _____
 Check # _____
 CC _____
 Cash _____
 Deposit _____
 Membership Mgr _____
 Email Distribution _____
 Mailing List _____
 New Member File _____

BACKGROUND INFORMATION

Classification _____
 (Website/Directory Listing)

Short Description _____
 of goods and/or Services

Year Company Started _____ Total Employees _____ Full-time (include yourself) _____ Part-time _____

MEMBERSHIP INVESTMENT (A portion of your dues may be tax deductible)

Membership Investment \$ _____
 Other: _____ \$ _____
 _____ \$ _____
 Total Due \$ _____

CREDIT CARD INFORMATION

Mastercard Visa

Account No. _____
 Expiration Date _____
 Cardholder Name _____
 Signature _____ (Please Print)

REASON FOR JOINING

- Advertising
- Business Exposure
- Company Policy
- Wellness Forum
- Community Involvement
- Leadership Opportunities
- Leads Group
- Legislative Rep
- Networking Events
- Financial Support
- Other _____

Signature _____ Date _____

Sponsor _____

Investment Guidelines 2009	
No. of Employees	Investment Amount
Schedule A	
1-2	\$295
3-10	\$425
11-20	\$575
21-30	\$675
31-45	\$895
46-60	\$1,075
61+	\$1,175
Non-Profits	
1-2	\$150.00
3-10	\$215.00
11-20	\$290.00
21-30	\$340.00
31-50	\$450.00
51-60	\$540.00
61+	\$590.00