



MEMBERSHIP ENROLLMENT FORM

Date _____

DIRECTORY INFORMATION (to be displayed online)

Company Name _____

Physical Address _____

Company Phone _____

Company Email _____

Website _____

Main Contact _____

Main Contact Title _____

Main Contact Phone _____

Main Contact Email _____

Billing Address (if different from physical)

Primary Directory Categories _____

(Select two from list on cobbchamber.org Business Directory)

COMPANY INFORMATION:

Number of Employees _____

☐ Minority Owned (If yes, please select below)

☐ Native American ☐ Asian ☐ African American

☐ Hispanic ☐ LGBTQ+

☐ Female Owned ☐ Other _____

☐ Veteran Owned

If your company is a foreign-owned entity, in what country is the parent company? _____

Do you export? ☐ Yes ☐ No

WHO HELPED YOU JOIN? (Name & Organization)

INVESTMENT LEVEL:

Chairman's Circle	Premier	Signature
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<input type="checkbox"/> \$6,000	<input type="checkbox"/> \$1,800	<input type="checkbox"/> \$500
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<input type="checkbox"/> \$3,000 *	<input type="checkbox"/> \$900 *	<input type="checkbox"/> \$300 *
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* Indicates special pricing for government officials and 501c3 non-profits. Contact the Cobb Chamber for entrepreneur rate (companies of 1-2 people).

MEMBERSHIP INFORMATION:

Why are you joining?

☐ Networking

☐ Leadership

☐ Visibility/Credibility

☐ Pro-Business Advocacy

☐ Cost Savings

☐ Build & Grow Your Community

☐ Other _____

☐ Please have someone contact me about sponsorship opportunities with the Chamber.

ADDITIONAL OPTIONS:

<input type="checkbox"/> Additional Categories in Directory <small>(for Signature level)</small>	\$50
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Premier = three additional categories included

Chairman's Circle = unlimited categories included

Please list additional categories below:

<input type="checkbox"/> Business Profile in Directory	\$50
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Includes brief profile (max 250 characters) & extended profile

(Complimentary with Premier membership & Chairman's Circle)

Membership Investment + \$25 App Fee= Total \$ _____

Please make checks payable to Cobb Chamber and send to:

Cobb Chamber, ATTN: Member Development

1100 Circle 75 Pkwy. Ste. 1000 Atlanta, GA 30339

Tax ID: #58-019-8114

Credit Card Payment Options (circle one)

VISA

Master Card

American Express

Discover

Card Number _____

Expiration Date _____ CSV _____ Amount \$ _____

Authorized Signature _____

Name on Card _____