



Serving the North Clackamas Region for Over 60 Years

Membership Application

(online application available at www.yourchamber.com)

Business Name: _____

(Please indicate complete name with appropriate abbreviations, initials etc.)

Street Address: _____ City _____ Zip _____

Billing Address: _____ City _____ Zip _____

Phone: _____ Fax: _____ Website: _____

Number of employees (at member location): _____ (2 part-time equals 1 full-time)
(includes: owners, partners, brokers, associates, representatives – total of all persons who work out of a particular business)

Classification (Category Listing) in the Member Resource Guide (Directory) and Database:

(Classification is used in database, on website and in resource guide. What would people Google to find you? That's a good basis to use. Chamber staff will assist you in choosing one of our classifications)

Your primary contact(s) for the Chamber: (list billing rep and company decision maker first): Indicate the main contact person for chamber activities, and note any addresses different from listing address **(use additional sheets if needed)**

<u>Name</u>	<u>Position Title</u>	<u>Direct Phone</u>	<u>Email</u>
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Billing Rep: _____

Main Rep: _____

Other Rep: _____

Other Rep: _____

(Please use additional page for other business associates who you would like to list)

Pricing guide: General Business: 1-5 employees \$385; 6-20 \$605; 21-50 \$825; 51-150 \$1,045; 151-300 \$1,320; 301 + \$1,760 (based on the # of full time equivalents working out of business location). Add multiple locations: 1 - 2 \$150 ea and 3 or more \$100 ea. Small Non-Profits (10 or less employees) \$385 / Elected Officials \$385 / Units of Government \$605.

Name Badge \$10 _____ each _____ total Name for badge: Please print _____

Annual Dues \$ _____ Processing Fee WAIVED (\$30.00 one-time only fee)
Special dues pricing – join for two years now instead of one, save 10 percent! Two-year pricing \$ _____

Monthly Payment Option Selected: Yes / No Monthly Pymt Amt: \$ _____ Down Pymt Amt \$ _____
Month in which ACH draft will begin? _____ (drafts are 5th of each month)

Total Due _____ (all sales on this form) Date _____ **Signature** _____
Membership is activated when total dues are received.

THREE AND FREE PROGRAM PARTICIPATING MEMBER: _____

North Clackamas Chamber of Commerce, 8305 SE Monterey Ave #104, Happy Valley, OR 97086 Questions? Call 503-654-7777

Office Use:		
Referred by: _____	Sales representative _____	
Date received: _____	Amount received \$ _____	Balance owing \$ _____

Check events that you are wanting to attend or would like more information about: (check all that apply)

- | | |
|---|--|
| <input type="checkbox"/> AM Business Connection (networking) | <input type="checkbox"/> Chamber 101 (orientation) |
| <input type="checkbox"/> Business After Hours (networking) | <input type="checkbox"/> Committee or Task Force Meeting (various focus) |
| <input type="checkbox"/> Business Forum Lunch (informational/educational) | <input type="checkbox"/> Issues Event (informational/educational) |

Areas of Interest: (check all that apply)

I'm interested in:

- advertising my biz
- hosting an event
- networking
- public policy
- showcase opportunities
- skills development
(leadership, seminars, workshops, etc.)
- special events
- sponsorships
- transportation and land issues
- tourism

I'm a:

- home based or family business
- traded sector business
- export business
- retail business
- professional services business
- not-for-profit social service agency

- I don't know yet what I'm interested

Is there a specific goal you have for joining? (An example: networking, advocacy, meeting new business people, community involvement, reaching new clients, seeking sponsorships, etc?)

New Member Advocate Program

YES! I plan to maximize my membership in the North Clackamas Chamber of Commerce! I would like to participate in the Chamber's Buddy program to meet with a longer-term Chamber member who can assist me in gaining the maximum benefit from my membership.

NO! Thank you. I do not require a Buddy. I am already familiar with how the Chamber works.

Signature: _____ Date _____

If you checked yes, the Chamber will contact you within two weeks with your Buddy's information. If you do not hear from your Buddy by two weeks after that, please let the Chamber know.

Deals & Discounts

Many of the members of the North Clackamas Chamber of Commerce provide discounts to other. If you would like to provide a discount or free service or benefit to the membership you may do so in the Member section of the website. (You will need your user name and password to enter the "member" portion of the website, which you should receive in an e-mail after we've entered you into the data base.) Be sure to check the "Deals and Discounts" on the right side of the website to see what other Chamber members are offering that might benefit YOU!

Signature: _____ Date _____

North Clackamas Chamber of Commerce

8305 SE Monterey Ave #104, Happy Valley, OR 97086 · TEL 503.654.7777 · FAX 503.653.9515

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