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# Membership Application

## Company Information – As it will appear in the Online Member Directory

Company Name: \_\_\_\_\_

Address: \_\_\_\_\_ Suite: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Website: \_\_\_\_\_

Type of Business (Classification): \_\_\_\_\_

# of Locations: \_\_\_\_\_  Nonprofit  Women-Owned  Veteran-Owned  Minority-Owned

## Owner's Information – Primary decision maker for the company

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Work Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email: \_\_\_\_\_

## Primary Representative for Membership (if other than Owner)

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Work Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email: \_\_\_\_\_

## Additional Company Representatives – to receive Frisco Chamber communications

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Email: \_\_\_\_\_ Title: \_\_\_\_\_

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Email: \_\_\_\_\_ Title: \_\_\_\_\_

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Email: \_\_\_\_\_ Title: \_\_\_\_\_

**Annual Membership Dues (select one)**

Applications will NOT be processed until the full payment has been made. The full payment includes your first year's dues and a one-time \$25 activation fee.

Business Partner \$425       Corporate Partner \$725       Executive Partner \$1300

Chairman Partner \$2750       Trustee Partner \$7500

*\*Non-profits receive a \$100 discount off the annual membership*

APPLICANT INFORMATION: Dues to the Frisco Chamber of Commerce are not deductible as a charitable contribution for income tax purposes but may be deductible as an ordinary and necessary business expense. A portion of dues, however, is not deductible as an ordinary and necessary business expense to the extent that the Frisco Chamber of Commerce engages in state or federal lobbying. The non-deductible portion for 2022 is 3%.

**Billing Information – credit card info is not saved and will need to be given again upon renewal**

My Billing Address is the same as my business address on page 1

Address: \_\_\_\_\_ Suite: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Form of Payment:  Check  Cash  Visa  MasterCard  AMEX  Discover

Card Number: \_\_\_\_\_ Exp: \_\_\_\_\_ CVV: \_\_\_\_\_

Make check payable to: Frisco Chamber of Commerce

*\*Future invoices will be sent to the Primary Representative for the membership, unless otherwise indicated here:* \_\_\_\_\_

AUTHORIZATION: I, the undersigned, do hereby apply for membership in the Frisco Chamber of Commerce. In doing so, I understand that membership in the Chamber is subject to the approval of the Board of Directors; that the benefits of membership may be changed at the discretion of the Board; that membership is based on satisfactorily paying annual dues; and that I understand and agree to abide by the policies established by the Board of Directors for the Chamber, and to support the aims and purpose of the organization.

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date

How did you hear about us?  Website  Chamber Event  Walk-in  Chamber Member  Other