



# MEMBERSHIP APPLICATION

Date \_\_\_\_\_

Business Name (DBA) \_\_\_\_\_ Number of Employees: FT \_\_\_\_\_ PT \_\_\_\_\_

Contact Name \_\_\_\_\_ Title/Position \_\_\_\_\_

Business Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Main Phone (to be published) \_\_\_\_\_ Mobile \_\_\_\_\_ FAX \_\_\_\_\_

E-Mail \_\_\_\_\_ Website \_\_\_\_\_

Best way to contact you:  Phone  Mobile Call  Email  Mobile Text  Facebook  Twitter

Billing/Mailing Address(es) (if different than above, please indicate which address is being provided):  
 \_\_\_\_\_  
 \_\_\_\_\_

Additional Contact Name \_\_\_\_\_ E-Mail \_\_\_\_\_

Additional Contact Title \_\_\_\_\_ Phone \_\_\_\_\_  
 (Add additional sheets if necessary)

Business Category (Classification listings on reverse side) \_\_\_\_\_

How did you learn about MACC? If referred, please list person/business. \_\_\_\_\_

Primary reason for investing? \_\_\_\_\_

ANNUAL INVESTMENT RATES		
Membership in MACC is renewable annually on the anniversary based on month joined. Cancellation of membership must be received in writing.		
Number of Employees	One Year Investment Level	Special Categories
1 — 2	\$200	Banks: \$600
3 — 10	\$250	Utilities: \$600
11 — 30	\$350	Restaurants: \$320
31 — 100	\$500	Restaurants: <i>Snacks &amp; Sweets</i> \$200
101 +	\$750	Non-Profit: <15 \$150
	Associate/Branch: \$125	Individual/Retired: \$100

Membership investment may be tax deductible as an ordinary and necessary business expense. Membership is not considered a charitable donation.

MEMBERSHIP INVESTMENT	
Annual Investment	\$ _____
Application Fee	\$ 30.00
Total	\$ _____

**Payment Options**  
 Check (payable to Monroeville Area Chamber of Commerce)  
 Cash VISA MasterCard Amex Discover

\_\_\_\_\_  
 Card Number Exp. Date

\_\_\_\_\_  
 Name on Card CVV Code

\_\_\_\_\_  
 Signature

Full Credit Card Billing Address, including zip code, if different from Business Address above.  
 \_\_\_\_\_

Primary Interests—check all that apply: <input type="checkbox"/> Networking Opportunities <input type="checkbox"/> Advertising Opportunities <input type="checkbox"/> Member-2-Member Discounts <input type="checkbox"/> ChamberChoice Insurance	<input type="checkbox"/> Educational Opportunities <input type="checkbox"/> Advocacy <input type="checkbox"/> Business Resources <input type="checkbox"/> OnDemand Energy	<input type="checkbox"/> Community Involvement <input type="checkbox"/> Economic Development <input type="checkbox"/> Penn National Insurance
--	--	---

**Please Return Completed Application With Payment To:**  
 Monroeville Area Chamber of Commerce ♦ 2790 Mossie Blvd.—Suite 715 ♦ Monroeville, PA 15146  
 Phone: 412-856-0622 ♦ Fax: 412-856-1030 ♦ E-mail: macc@monroevillechamber.com

White Copy- File    Yellow Copy – Office Use    Pink Copy – Member's Record

**Office Use Only:**  
 Profile ID: \_\_\_\_\_  
 Invoice: \_\_\_\_\_  
 Database     New Member  
 R     CCSC     NL     CC