



GREATER MONTGOMERY AREA CHAMBER OF COMMERCE

MEMBERSHIP APPLICATION

- Renewing Member**
 New Member - Referred by: _____
 Call me, I'm interested in a Ribbon Cutting

INFORMATION TO BE POSTED ON CHAMBER WEBSITE:

Contact Name/ Title:	
Name of Business:	
Business Category (Select 1 category. Visit our website for full list of options)	(Note: Partner and Advocate Members may select up to 3 categories.)
Description of Product/Service	
Phone:	
Fax:	
Website:	
Street Address:	
City/State/Zip:	

BUSINESS DEMOGRAPHIC INFO (WILL NOT BE POSTED ON WEB)

Year Business was Established:	
Number of Full Time Employees:	

SEND CHAMBER eMAIL COMMUNICATIONS TO:

Contact Person #1/ Title:	
Email:	
Phone:	
Contact Person #2/ Title: (optional)	
Email:	
Phone:	

MEMBERSHIP OPTIONS		Anniversary dates are a full calendar year from date of payment	
General Membership	<input type="checkbox"/>		\$175.00
Supporter Membership	<input type="checkbox"/>		\$500.00
Affiliate Membership	<input type="checkbox"/>		\$1,000.00
Partner Membership	<input type="checkbox"/>		\$2,500.00
Advocate Membership	<input type="checkbox"/>		\$5,000.00
Club/Association group (w/o paid staff)/Retired Citizen	<input type="checkbox"/>		\$75.00
Donation to the Alice Sutcliff Scholarship Fund	<input type="checkbox"/>	Suggested donation \$10	

TOTAL ENCLOSED: \$

PAYMENT OPTIONS:

- Check enclosed - Payable to "GMACC"
 I prefer to pay by VISA/MC/DISCOVER. Please email me PayPal link to:
Please Mail Application (and payment, if by check) to:
GMACC, 200 N. River Street, Montgomery, IL 60538

Rev'd 6/1/2022

200 N. River Street, Montgomery, IL 60538
630.897.8137 / www.chamberofmontgomeryil.org

GMACC -- Promoting Partnerships for Business Success