



Matthews Chamber of Commerce

Supporting Business ♦ Building Community

www.matthewschamber.com

New Member Application

Business Name: _____

Mailing Address _____

City _____ State _____ Zip _____

Physical Address (if different) _____

City _____ State _____ Zip _____

Phone _____ E-mail _____

Website _____

Contact for Chamber info: _____ email: _____

Additional Contacts: _____ email: _____

Contact: _____ email: _____

Contact: _____ email: _____

Type of Business: _____ Year Established: _____

Brief Description of Business _____

# of Full-time Employees	Rate per Year	Total Dues
1 to 4	\$ 275.00	Dues: _____
5 to 25	\$ 320.00	
26 to 50	\$ 440.00	Application Fee <u>\$ 35.00</u>
51 to 100	\$ 550.00	
Over 100	\$ 770.00	
Non-Profit	\$ 150.00	Total: _____
Total # of Full Time Employees: _____		

Member Signature _____ Date _____

Circle form of Payment: We accept Cash, Checks, American Express, MasterCard, Visa

Card # _____ Exp Date _____

Name on the Credit Card _____

Sponsoring Member: _____