

MEMBERSHIP ENROLLMENT FORM

Date _____

DIRECTORY INFORMATION (to be displayed online)

Company Name _____

Main Contact _____

Main Contact Title _____

Main Contact Phone _____

Main Contact Email _____

Physical Address _____

Phone _____

Website _____

Directory Category _____

(Select from list on cobbchamber.org Business Directory)

Company Email _____

Billing Address (if different from physical)

COMPANY INFORMATION:

Number of Employees _____

Minority Owned (if yes, please select below)

Native American Asian African American

Hispanic Other _____

Female Owned

Veteran Owned

LGBTQ+ Owned

If your company is a foreign-owned entity, in what country is the parent company? _____

Do you export? Yes No

WHO HELPED YOU JOIN? (Name & Organization)



INVESTMENT LEVEL:

Chairman's Circle	Premier	Signature
<input type="checkbox"/> \$5,000	<input type="checkbox"/> \$1,500	<input type="checkbox"/> \$400
<input type="checkbox"/> \$2,500 *	<input type="checkbox"/> \$750 *	<input type="checkbox"/> \$250 *

* Indicates special pricing for elected officials and 501c3 non-profits. Contact the Cobb Chamber for entrepreneur rates (companies of 1-2 people).

ADDITIONAL OPTIONS:

Additional Category in Directory (for Signature level) \$50

Premier = two additional categories

Chairman's Circle = unlimited categories

Please list additional categories below:

Business Profile in Directory \$50

Includes brief profile (max 250 characters) & extended profile

(Complimentary with Premier membership & Chairman's Circle)

Please have someone contact me about sponsorship opportunities with the Chamber.

Dues Amount + Additional Options = Total \$ _____

Please make checks payable to Cobb Chamber and send to:

Cobb Chamber, ATTN: Member Development Department

1100 Circle 75 Pkwy. Ste. 1000 Atlanta, GA 30339

Tax ID: #58-019-8114

Credit Card Payment Options (circle one)

VISA Master Card American Express Discover

Account Number _____ Security Code _____

Expiration Date _____ Amount \$ _____

Authorized Signature _____

Name on Card _____