



APPLICATION FOR MEMBERSHIP

101 PIERCE STREET
 SIOUX CITY IA 51101
 T 712-255-7903
 SIOUXLANDCHAMBER.COM

Today's Date: _____

Company Name: _____

Main Phone #: (_____) _____ Alternate Phone #: (_____) _____

Toll-Free #: (_____) _____ Cell Phone #: (_____) _____

Fax #: (_____) _____ General E-mail address: _____

Company web site: _____

Physical Address: _____

City: _____ State: _____ Zip: _____

Billing Address (if different than physical) _____

City: _____ State: _____ Zip: _____

EXPECTATIONS: ___ Company Promotion ___ Educational Opportunities ___ Increase Sales
 ___ Meet New Customers ___ Learn about new businesses ___ Online Profile

Other: _____

Who should be listed as your company's primary and/or billing representative:

	Name	Phone #	E-mail	Title
Primary:	_____	_____	_____	_____
Billing:	_____	_____	_____	_____

What other employees should be listed as company representatives:

Additional:	_____	_____	_____	_____
Additional:	_____	_____	_____	_____
Additional:	_____	_____	_____	_____

COMPANY STARTING DATE IN COMMUNITY: _____

BUSINESS DESCRIPTION (MAXIMUM OF 200 CHARACTERS):

KEY WORDS FOR WEBSITE SEARCH TOOLS:

BUSINESS CATEGORIES:

HOTELS/MOTELS: Number of Rooms _____ Restaurant/Lounge Employees _____

BANKS/SAVINGS & LOANS: Million Dollars of Assets _____

NURSING HOMES: Number of Beds _____

APARTMENTS: Number of Apartments _____

-Or-

GENERAL: Number of local employees, including owner/manager:

Full Time _____ Part Time _____ Total FTE _____ (2 part time = 1 full time)

ANNUAL INVESTMENT: \$ _____

Billing Preference: ANNUAL SEMI-ANNUAL * QUARTERLY * MONTHLY

(*Requires Auto ACH or Auto Credit Card Authorization)

Payment Preference: AUTO ACH AUTO CREDIT CARD

INVOICE MAILED OR E-MAILED

AUTO ACH PAYMENT AUTHORIZATION

AUTO CREDIT CARD AUTHORIZATION

(American Express, Discover, MasterCard, or Visa)

Name on Account _____

Name on Card _____

Address _____

Billing Address _____

Bank Name _____

Credit Card # _____

Routing # _____

Exp Date _____ Verif Code _____

Account # _____ Check _____ Svgs _____

The above-named company ("Company") hereby requests and authorizes the Siouxland Chamber of Commerce to charge Company's bank account or credit card account according to the schedule indicated above for its annual membership in the Siouxland Chamber of Commerce. Stated amount may be increased from time to time by the Siouxland Chamber of Commerce, in its and absolute sole discretion. This authorization shall remain in effect, including for any such increases in membership fees, until the Siouxland Chamber of Commerce receives at least thirty (30) days prior written notification from Company of its intent to terminate said authorization.

I understand that this payment plan may be cancelled by the Siouxland Chamber of Commerce or Merchant due to NSF (Non-sufficient Funds/Credit Card Charge denial). In this case, I will be liable to pay a fee of \$25.00 (or the amount allowable by law), which may be automatically debited/charged for each NSF/Denial.

I represent and warrant that I am authorized to execute this payment authorization for the purpose of implementing this payment plan. I indemnify and hold the Siouxland Chamber of Commerce, the bank, the credit card company and Merchant harmless from damage, loss or claim resulting from all authorized actions hereunder.

1-30-19

MEETING INTERESTS:

Please check the box of the meetings that you or your reps are interested in.

_____ Community Enhancement _____ Government Relations _____ Ag _____ Entrepreneur Hour

_____ Transportation _____ Small Business Education Series _____ Retail Roundtable _____ Prospect 101

Applicant Signature:

NOTE: The Siouxland Chamber of Commerce is a membership operated private non-profit company. As such, its Board of Directors act upon any application submitted for membership and it reserves the right to reject applications. Likewise, the Board of Directors reserves the right to expel any member for conduct it deems unbecoming and not in the best interests of the total membership of the Siouxland Chamber of Commerce.