



2023 MEMBERSHIP APPLICATION

Name of Firm or Business:

Owner/Manager:

Number of Employees:

Business Address:

Business Phone:

Fax Number:

Website:

Category to be listed under in membership directory and website (See categories listed on Chamber website):

Email Address (This will be the primary contact for all Chamber communications including invoices and newsletter):

As it is our policy; **WE REFER OUR MEMBERS EXCLUSIVELY.** Please provide a description of your business below:

2023 Membership Dues (Membership investments are deductible from income tax as a business expense)

GENERAL MEMBERSHIP PRICING BASED ON NUMBER OF FULL TIME EMPLOYEES

Each business location will be billed as its own membership

1-4 \$200	100-149 \$1200
5-9 \$250	150 -199: \$1600
10-19 \$300	200- 249: \$2000
20-49 \$400	250-499: \$2500
50- 99: \$650	500+: \$7000

At Home Business (more than 2 people, regular dues apply): \$120

Civic & Service Organizations (without paid employees): \$140

Individuals: \$60

OTHER MEMBERSHIP INVESTMENT CATEGORIES

Public Service Utilities: \$780

FINANCIAL INSTITUTIONS (includes up to 4 locations)

Banks, Credit Unions and Savings

Millions in Deposits:

0 -50: \$1000

51-100: \$2000

101+: \$3000

____ I/We hereby apply for membership in the Athens Area Chamber of Commerce.

____ I/We hereby agree to be bound by the Constitution and the By-Laws and Code of Conduct of the Chamber now in force or which may hereafter.

Enclosed please find \$ _____ for membership from _____ to 12/31/23. Membership will be automatically renewed and your account billed. unless written notification is received stating your desire to drop membership.

Please remit payment to: Athens Area Chamber of Commerce 340 W State St Suite 242 Unit 48. Athens. OH 45701
Phone 740.593.9353 | Fax 740.593.0186 | Email: dawn@athenschamber.com | Website: www.athenschamber.com

Signature: _____

Date: _____