MEMBERSHIP APPLICATION

BUSINESS NAME _____ Year Business Started_____

FIRST NAME _____ LAST NAME _____

TITLE _____

BUSINESS ADDRESS _____ APT/SUITE _____

CITY _____ STATE _____ ZIP _____

☐ Please check here if above is a residential address ESTABLISHED DATE _____

BUSINESS TYPE / CATEGORY _____

MAIN PHONE ( ) _____ EXTENSION _____

MOBILE ( ) _____

OTHER ( ) _____

E-MAIL _____

WEB _____

SOCIAL MEDIA _____

HOW DID YOU LEARN ABOUT THE CHAMBER? _____

 # OF EMPLOYEES
- ☐ FULL TIME_____
- ☐ PART TIME_____

BUSINESS STATUS
- ☐ HOME BASED
- ☐ POP UP
- ☐ ARTISAN COMMUNITY
- ☐ SOLE PROPRIETOR
- ☐ B CORPORATION
- ☐ LGBT OWNED
- ☐ MINORITY OWNED
- ☐ WOMAN OWNED
- ☐ VETERAN OWNED
- ☐ OTHER _____

I'M INTERESTED IN:
- ☐ RIBBON CUTTING
- ☐ NETWORKING
- ☐ MARKETING
- ☐ SCHOLARSHIP
- ☐ BUSINESS ADVOCACY
- ☐ OTHER _____

SELECT YOUR MEMBERSHIP FEE (based on number of employees):

☐	$195.00	1 to 5	Business Focused Membership Levels (call for benefit info)	
☐	$275.00	6 to 10	☐ $ 2,500.00	Sterling Circle
☐	$350.00	11 to 20	☐ $ 5,000.00	Gold Circle
☐	$500.00	21 to 50	☐ $10,000.00	Blue Circle
☐	$625.00	51 to 150	☐ $30,000.00	Platinum Circle
☐	$1,100.00	151 to 200	☐ $45,000.00	Diamond Circle
☐	$1,600.00	201 to 251	☐ $60,000.00	Exclusive Circle
☐	$50.00	Artisan and Non-business individual person		

SELECT MARKETING OPTIONS (in addition to Membership Fee):

☐ $500.00 Executive Visibility Package includes CEO visit with Media coverage, YouTube posting, and 3.0 e-Newsletter Spotlight

☐ $60.00 per month ☐ $175.00 every 3 months ☐ $600.00 per year Advertising on weekly e-Newsletter

$_____ TOTAL from above

Method Payment: ☐ Check ☐ Visa ☐ Mastercard ☐ AMEX

CARD NUMBER _____ EXPIRATION DATE _____ / _____

Provide Credit Card Billing address if it is different from above address in blank area under total.

NAME AS IT APPEARS ON CARD _____ CCV/CCID _____ ZIP _____

I authorize the Daly City Colma Chamber of Commerce to charge the amount listed above to the credit card provided herein. I agree to pay for this purchase in accordance with the issuing bank cardholder agreement. Credit card will be charged on annual membership renewal date. Dues are subject to the approval of the Board of Directors and may be a TAX DEDUCTIBLE item.

I authorize the Chamber to email me regarding Chamber membership benefits, invoices, economic, and business news. I authorize the Chamber to publish my name, photo and/or business information in the Chamber's eNewsletter and other publications. Membership Applications are subject to Executive Board of Directors approval.

☐ Membership shall be continuous unless canceled by written resignation.

APPLICATION/PAYMENT ENDORSEMENT

X _____ DATE _____

SIGNATURE

Submit membership on-line www.dcchamber.org/join.php or **Mail completed application to the address below.**

Complete form on-line
https://bit.ly/3QqKGfW

Download paper application:
https://bit.ly/dcccmembership

20241202-f

Daly City Colma Chamber of Commerce 2790 Junipero Serra Blvd., Suite A, Daly City, CA 94015 | 650-755-3900 | www.dcchamber.org | felicia@dcchamber.org