



Membership Application

Date: _____
Company Name: _____
Contact Person: _____ Title: _____
Mailing Address _____
City: _____ State: _____ Zip: _____
Phone: _____ Fax: _____
Email: _____ Website: _____
Number of Employees*: Full Time: _____ Part Time: _____
Type of Business: _____ Year Business Started: _____
Referred by: _____

Reason You Joined (please check top 3): Networking Advertising/Marketing
Community Visibility/Recognition Leadership Opportunities
Programs & Events Health Insurance Professional Development
Public Policy/Advocacy Economic Development Technology
Affiliate of Worcester Regional Chamber of Commerce
Other: _____

Committee/Groups You Would Consider Joining:

Membership/Ambassadors Programs/Events Golf Tournament
Economic Development Tourism Technology Home & Business Expo
Yes, I want No, I do not want – to receive email from the Chamber!
(Blackstone Valley CC does NOT rent or sell member email addresses.)

METHOD OF PAYMENT

Check Invoice American Express MasterCard Visa

Name on Card: _____

Account Number: _____ CVV: ____ Exp. Date: _____

**Base membership dues investment is \$295 for companies with five (5) or fewer full-time employees. For additional full-time, local employees, please add \$5.00 each. This industry standard formula has been developed to insure that all member dues are proportional to the respective size of each business or organization.*

Membership Investment Dues: \$ _____

Return Application to: Blackstone Valley Chamber of Commerce