## **Membership Application**

**Number of Employees** 



**Annual Investment Dues** 

*Non-Profit Must be a 501(c)(3) & 501(c)(6)	
Business Name: Dat	te:
Contact Person: Title	e:
Business Address: Pho	one:
Email: Webpage:	
# Employees Full-time: Mailing/Billing Address:	
Category of Business for Directory Listing: Yea	ar Business Established:
Recommended By: Additional Email Addresses to Receive Mailings:	
/isa/MC/AMEX	
Signature	
Expiration date:	_
Fotal Annual Investment \$	
Application Fee \$40.00 Join onlin	ne <u>here</u> .
Total \$	

Your investment is not deductible as a charitable contribution, but may be deductible as a business expense. In accordance with the Omnibus Reconciliation Act of 1993, we estimate that 90% of your dues will be deductible as a business expense. Membership dues are non-refundable.

## **Chamber San Mateo County**