



MEMBERSHIP APPLICATION

T (510) 724-4484

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P. O. Box 1

Pinole, CA 94564

www.pinolechamber.org

pinolechamber@yahoo.com

Business Name _____ Date _____

Owner's Name(s) _____

Type of Business _____

Manager's Name _____

Business Address _____

City/Town _____ Zip _____

Business Phone _____ Fax _____

Email Address _____ Website _____

Any changes (new email, address, phone number) to previous Chamber information.

1. BASIC MEMBERSHIP

Number of employees	Dues	Amount
1 - 5	90.00	_____
6 - 10	170.00	_____
11 - 25	250.00	_____
26 - 50	400.00	_____
51 - 99	650.00	_____
100 +	800.00	_____

2. MEMBERSHIP - OTHER

Home based business	90.00	_____
2nd Branch Office	190.00	_____
Non-Profit Organization 501(c)3	90.00	_____

3. ADVERTISING FEES

Web Listing (Promotion of your business)	Amount per calendar year	150.00	_____
Quarterly newsletter ad:	Per Issue	Per Year	
Business Card Size	75.00	225.00	_____
Double Business Card Size	125.00	375.00	_____
Half Page	200.00	600.00	_____
Full Page	350.00	1,050.00	_____

4. VOLUNTARY CONTRIBUTIONS:

Contribution to Scholarship Fund	_____
Technology Fund	_____

5. SUPPORTING MEMBERSHIPS - Contact the Chamber for more information on benefits and advantages.

Business Leader - Annual sponsorship for Developers/Large Companies	\$5,000.00	_____
Business Partnership - Annual sponsorship for Medium Companies	\$2,500.00	_____
Business Supporter - Annual sponsorship for Small Companies	\$1,000.00	_____

TOTAL ENCLOSED:

Payment by: _____ check made payable to the Pinole Chamber of Commerce or _____ credit card - select one: VISA MC

Credit Card Number: _____ Expiration Date: _____

Name on Card: _____

Billing Address: _____

Authorizing Signature: _____