

Mexico Area Chamber of Commerce

Application For Membership

Please Type or Print Legibly

Main Representative _____

Company _____

Address _____

Phone _____ Fax _____

Type of business (check all that apply):

- | | |
|---|---|
| <input type="checkbox"/> Agricultural | <input type="checkbox"/> Investment & Finance Companies |
| <input type="checkbox"/> Amusement & Entertainment | <input type="checkbox"/> Manufacturing & Processing |
| <input type="checkbox"/> Apartments/mobile home parks | <input type="checkbox"/> Professional |
| <input type="checkbox"/> Automotive/Sales & Repair | <input type="checkbox"/> Public Utilities |
| <input type="checkbox"/> Banks, Savings & Loans | <input type="checkbox"/> Publishers & Printers |
| <input type="checkbox"/> Charities | <input type="checkbox"/> Radio & Television |
| <input type="checkbox"/> Churches | <input type="checkbox"/> Real Estate |
| <input type="checkbox"/> Civic Clubs | <input type="checkbox"/> Restaurants, Cafes, & Taverns |
| <input type="checkbox"/> Civic Members | <input type="checkbox"/> Retailers |
| <input type="checkbox"/> Construction | <input type="checkbox"/> Schools |
| <input type="checkbox"/> Diversified | <input type="checkbox"/> Services |
| <input type="checkbox"/> Hotels & Motels | <input type="checkbox"/> Transportation |
| <input type="checkbox"/> Individuals | <input type="checkbox"/> Wholesalers & Distributors |
| <input type="checkbox"/> Insurance | <input type="checkbox"/> Other _____ |

Email _____

Would you be willing to receive the monthly newsletter by email? _____

Website _____

Brief description to accompany link _____

Other representatives email to receive newsletter:

Please check any programs you would like more information on:

_____ Chamber Ambassadors _____ Progress Mexico
_____ Hello Mexico _____ Red Alert

Mexico Area Chamber of Commerce Membership Dues Structure

Retired Individuals (65 and older)	\$ 50.00
Individual	\$ 75.00
Church/Civic/Volunteer	\$100.00
Family Farm	\$125.00
Out of County Vendors	\$150.00
Hospital/Government/ Education	\$ 85.00 per million dollars of annual budget
Financial Institutions	\$ 30.00 per million in Audrain County Deposits (minimum \$650.00)
Professional/Real Estate/Insurance	\$ 125.00 per professional + \$10 per support staff
Distribution/Manufacturing/Service/Retail	1-10 employees \$ 150.00 11-25 employees \$ 300.00 26-50 employees \$ 750.00 51-100 employees \$1000.00 100 or more employees \$1500.00 (2 part time employees = 1 full time)

After reviewing the dues structure, I agree to invest \$_____ for annual membership dues.

Please bill me: _____ Annually
 _____ Semi-Annually
 _____ Quarterly (for dues over \$200 per year only)

Please return to: Mexico Area Chamber of Commerce
 100 West Jackson
 Mexico, MO 65265
 FAX: 573-581-6226

Signature

Date

Your application will undergo a formal approval at the next Chamber Board meeting, held the second Wednesday of each month except August.

For office use only:

Received _____ Paid _____ Approved _____ # _____