



Gaithersburg-Germantown Chamber of Commerce, Inc.

4 Professional Drive, Suite 132, Gaithersburg, Maryland 20879-3426 • (301) 840-1400 • Fax (301) 963-3918 • info@ggchamber.org • www.ggchamber.org

MEMBERSHIP APPLICATION

BUSINESS NAME _____

BUSINESS MAILING ADDRESS _____

CITY _____ STATE _____ ZIP CODE _____

BUSINESS TELEPHONE _____ FAX _____ EMAIL _____

WEBSITE _____

BUSINESS CATEGORY (Refer to List or www.ggchamber.org) _____

SECONDARY BUSINESS CATEGORY (\$20 Fee for Secondary Category) _____

NUMBER OF EMPLOYEES – FULL-TIME _____ PART-TIME _____ DATE BUSINESS FOUNDED _____

DESCRIPTION OF BUSINESS (In 15 words or less describe your business) _____

PRIMARY CONTACT NAME _____ TITLE _____

PRIMARY CONTACT TELEPHONE _____ FAX _____ EMAIL _____

How did you hear about the Gaithersburg-Germantown Chamber of Commerce? _____

NOTE: Information above will be published in GGCC Communications, including the website, newsletter, directory, etc.

ADDITIONAL REPRESENTATIVES, MEMBERSHIP LISTINGS, & GGCC COMMUNICATIONS

The GGCC provides three communication and membership listing options for your consideration: 1) Additional representatives within your company receive ALL GGCC Communications and are listed in the Membership Directory & Other GGCC Communications with their contact information {\$75 Each}; 2) Additional representatives within your company are listed in the Membership Directory & Other GGCC Communications [only the name is listed with no contact information] {\$25 Each}; 3) Additional representatives within your company receive only GGCC Email Communications [these representatives are not listed in the Membership Directory nor in Other GGCC Communications] {No Cost}. Use an additional sheet of paper if necessary.

		MEMBERSHIP DIRECTORY		GGCC
		ALL INFO LISTED	NAME ONLY	EMAIL ONLY
		\$75 EACH	\$25 EACH	No Cost
NAME _____	EMAIL _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
PHONE _____	FAX _____			
NAME _____	EMAIL _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
PHONE _____	FAX _____			
NAME _____	EMAIL _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
PHONE _____	FAX _____			

GGCC Office Use Only: CCA \$ Date Acct MP Notes

GAITHERSBURG-GERMANTOWN CHAMBER OF COMMERCE ANNUAL DUES

(GGCC Annual Dues vary based on the number of full-time equivalent employees in your company – 2 part-time employees = 1 full-time employee)

NUMBER OF EMPLOYEES	ANNUAL DUES	NUMBER OF EMPLOYEES	ANNUAL DUES	NUMBER OF EMPLOYEES	ANNUAL DUES
<input type="checkbox"/> 1-2	\$275	<input type="checkbox"/> 10-24	\$565	<input type="checkbox"/> 100-199	\$1,350
<input type="checkbox"/> 3-4	\$380	<input type="checkbox"/> 25-49	\$730	<input type="checkbox"/> 200-499	\$1,620
<input type="checkbox"/> 5-9	\$515	<input type="checkbox"/> 50-99	\$890	<input type="checkbox"/> 500 OR MORE	\$1,700
<input type="checkbox"/> NON-PROFIT: GOVERNMENT AGENCIES & PUBLIC SCHOOLS & 501C CORPORATIONS WITH < 50 EMPLOYEES					\$130

PAYMENT INFORMATION

CHECK ENCLOSED MASTERCARD VISA AMERICAN EXPRESS

ANNUAL DUES (FROM TABLE ABOVE) _____
 ADDITIONAL BUSINESS CATEGORY _____
 ADDITIONAL REPRESENTATIVES _____
 ADDITIONAL NAME LISTINGS _____
TOTAL AMOUNT DUE _____

NAME ON CARD _____ CARD NUMBER _____
 BILLING ADDRESS _____ EXPIRATION DATE _____ SECURITY CODE _____
 CITY, STATE, ZIP _____ SIGNATURE _____

MEMBER TO MEMBER DISCOUNT PROGRAM

A great way to further expose your business to other Chamber Members is to provide a discount to members of the Gaithersburg-Germantown Chamber of Commerce. Any discount you offer will be publicized to other GGCC member companies. As a GGCC member in good standing, your company and its employees may take advantage of any discount being offered by other GGCC member companies.

PERCENTAGE OR TYPE OF DISCOUNT OFFERED _____

AUTHORIZATION

I am authorized to and hereby give consent for the company listed above to receive faxes, emails, and other communications, sent by or on behalf of the Gaithersburg-Germantown Chamber of Commerce (GGCC). I understand that I can revoke this consent by contacting the GGCC in writing. I/We also agree and certify that as a GGCC member, I/We will observe the highest level of ethics in conducting business.

Signature _____ Date _____