



Gaithersburg-Germantown Chamber of Commerce, Inc.

910 Clopper Road, Suite 205N, Gaithersburg, Maryland 20878 • (301) 840-1400 • Fax (240) 261-6395

2017 RESTAURANT MEMBERSHIP APPLICATION

BUSINESS NAME _____

BUSINESS MAILING ADDRESS _____

CITY _____ STATE _____ ZIP CODE _____

BUSINESS TELEPHONE _____ FAX _____ EMAIL _____

WEBSITE _____

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

SECONDARY BUSINESS CATEGORY (\$50 Fee for Secondary Category) _____

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

DESCRIPTION OF BUSINESS (In 100 words or less describe your business) _____

PRIMARY CONTACT NAME _____ TITLE _____

PRIMARY CONTACT TELEPHONE _____ FAX _____ EMAIL _____

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

How did you hear about the GGCC? _____

What do you expect to gain from your membership? _____

ADDITIONAL REPRESENTATIVES, MEMBERSHIP LISTINGS, & GGCC COMMUNICATIONS

Your membership includes one PRIMARY contact who is listed on our website and in our Member Directory. Additional listings are available for \$75. However, participation in the Chamber is encouraged for all your employees at no additional cost. Please list below.

	<u>MEMBERSHIP DIRECTORY</u>	<u>PARTICIPATION</u>
	<u>LISTING</u>	<u>ONLY</u>
	\$75 EACH	NO COST
NAME _____ EMAIL _____	<input type="checkbox"/>	<input type="checkbox"/>
PHONE _____		
NAME _____ EMAIL _____	<input type="checkbox"/>	<input type="checkbox"/>
PHONE _____		

WELCOME TO THE GAITHERSBURG-GERMANTOWN CHAMBER

GAITHERSBURG-GERMANTOWN CHAMBER OF COMMERCE ANNUAL DUES

Number of Seats	ANNUAL DUES
<input type="checkbox"/> 1-60	\$350
<input type="checkbox"/> 61-130	\$550
<input type="checkbox"/> 130 & UP	\$795

PAYMENT INFORMATION

CHECK ENCLOSED

MASTERCARD

VISA

AMERICAN EXPRESS

ANNUAL DUES (FROM TABLE ABOVE) _____
ADDITIONAL BUSINESS CATEGORY (50 EACH) _____
ADDITIONAL REPRESENTATIVES (\$75 EACH) _____
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 regardless of whether you provide a discount or not.

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. All applications must be approved by the GGCC Board of Directors.

Signature _____ Date _____