

# STAMFORD CHAMBER OF COMMERCE

107 E. McHarg Street  
Stamford, Texas 79553

325-773-2411  
chamber@stamfordcoc.org

## MEMBERSHIP APPLICATION

Business Name: \_\_\_\_\_

Owner: \_\_\_\_\_

Physical Address: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip code: \_\_\_\_\_

Business Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Website: \_\_\_\_\_

List what category best describes your business.

\_\_\_\_\_

Number of Employees: \_\_\_\_\_ Year Business Established: \_\_\_\_\_

Primary Contact Name: \_\_\_\_\_ Title: \_\_\_\_\_

Primary Contact Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

Note: Information above will be published in SCOC communications, including website, marquee, directory, etc.

What do you expect to gain from your membership? \_\_\_\_\_

\_\_\_\_\_

### Payment Information

1-4 employees \$120 (\$10 per month)

5-15 employees \$180 (\$15 per month)

16+ employees \$300 (\$25 per month)

Banks \$180 (\$15 per month)

2<sup>nd</sup> business \$90 (\$7.50 per month)

Individuals \$60 (\$5 per month)

Note: Monthly payment options are available but not required.

Cash                      Check                      Total amount enclosed: \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_