

Federal Contractors Chamber of Commerce (FCCoC)

New Member Application Form

SECTION 1: ORGANIZATION INFORMATION

Business/Organization Name: _____

Address _____ City _____ State _____

Year Established: _____

NAICS Code(s): _____

Primary Industry/Services Offered: _____

☐ SAM.gov Registration Status: ☐ Registered ☐ In Process ☐ Not Registered

☐ Business Structure: ☐ Sole Proprietor ☐ LLC ☐ S-Corp ☐ C-Corp ☐ 501(c)(3) ☐ Other: _____

SECTION 2: CONTRACTING EXPERIENCE & READINESS

☐ Have you ever submitted a federal proposal? ☐ Yes ☐ No

☐ If yes, how many times? _____ Were any awarded? ☐ Yes ☐ No

☐ Do you currently hold any contracts? ☐ Yes ☐ No

Agency and scope of work (if any):

☐ Current federal contracting capacity:

☐ ☐ Just starting - need basics

☐ ☐ Preparing to register/certify

☐ ☐ Actively bidding - no awards yet

☐ ☐ Recently awarded a contract

☐ ☐ Experienced - seeking to scale

☐ Biggest challenge in federal contracting:

☐ ☐ Finding opportunities ☐ Understanding regulations ☐ Writing proposals

☐ ☐ Pricing/cost estimating ☐ Teaming ☐ Compliance/certifications ☐ Other: _____

SECTION 3: MEMBERSHIP EDUCATION INTEREST

☐ ☐ Chamber Boot Camp

☐ ☐ Chamber Individual Workshops

☐ ☐ Chamber Basic Program

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- ☐ ☐ ☐ Chamber Advance Program
☐ ☐ ☐ Chamber Specialty Workshops
☐ Construction -A/E
☐ GSA
☐ GSA Leasing
☐ Train the Trainer
☐ Other: _____

SECTION 4: SOCIO-ECONOMIC STATUS

- ☐ ☐ ☐ Woman-Owned Small Business (WOSB)
☐ ☐ ☐ Minority-Owned Business
☐ ☐ ☐ Service-Disabled Veteran-Owned Small Business (SDVOSB)
☐ ☐ ☐ Veteran-Owned Small Business (VOSB)
☐ ☐ ☐ HUBZone Certified
☐ ☐ ☐ 8(a) Certified
☐ ☐ ☐ Disadvantaged Business Enterprise (DBE)
☐ ☐ ☐ None of the above
☐ ☐ ☐ In Process of Certification: _____

SECTION 5: ANNUAL MEMBERSHIP LEVELS - Admin, Registration, and Setup-1

- ☐ ☐ ☐ Non-Members Case-Law Opportunities Only [Non Member Pricing]
☐ ☐ ☐ Sister Organizational Membership - \$499 — / \$200 — Per additional person
☐ ☐ ☐ Business Level Membership - \$999 — / \$350 — Per additional person
☐ ☐ ☐ PRO - Business Level Annual Membership \$1999 — 3 persons/ \$350 — Per additional person

SECTION 6: SIGNATURE

Signature:

Date: _____

Organizations Signature Authority Name / Title (Print):

Organizations Signature Authority -Signature _____

Phone _____

Email _____

Please submit to JGrismore@federalcontractorchamberofcommerce.com