



www.losfresnoschamber.com

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Membership Application

Date of Application: _____

Business Name: _____

Type of Business: _____

Owner/Manager: _____

Mailing Address: _____

Email Address: _____

Website: _____

Business Phone: _____

Cell Phone: _____

Membership Fee: _____ **(We accept checks, cash, or money orders)**

Accepted: _____

MEMBERSHIP CATEGORIES

-Corporate Member: **\$350.00** (Businesses with more than 50 employees)

-Business Member: **\$175.00** (Businesses with fewer than 50 employees)

-Governmental Entity: **\$300.00**

-Non-Profit Member: **\$75.00**

*-Individual Member: **\$75.00**

*An Individual Member is a Non-Voting Member, not affiliated with any organization or business or is an officer or employee of a member business, and who wishes to have an individual membership.

-Ask about second business.