



*Jackson Madison County
African American Chamber of Commerce*

351-C North Royal Street P.O. Box 703, Jackson, Tennessee 38302
Phone: 731-424-2030 • www.jmcaacc.org • Email: jacksonmcaacc@gmail.com

TO: Prospective Member of the Jackson Madison County African American Chamber of Commerce

FROM: Don A. McCorry, Executive Director

RE: Welcome!

The Jackson Madison County African American Chamber of Commerce (JMCAACC), as business owners, understands the ongoing struggle to make a business a success. The JMCAACC, for that reason, is “reaching out to meet a community need.” With your patronage, we will bring African American business owners together, help empower those businesses, and in turn empower the African American community.

Presently, the Board of Directors is developing many economic and awareness programs that will empower our community thereby strengthening our businesses. The JMCAACC will promote and assist the economic growth and development of businesses that are members of the group. We will have a positive impact on the business community as well as the West Tennessee region. Upon the return of your application along with your membership dues, we invite you to consider contacting our office to discuss any of the following committees:

- Program Committee
- Membership and Recruitment Committee
- Board Operations Committee
- Budget/Finance Committee
- Student Affairs Committee

Again, thank you for your interest in becoming a member of the Jackson Madison County African American Chamber of Commerce.

Attachments



*Jackson Madison County
African American Chamber of Commerce*

351-C North Royal Street P.O. Box 703, Jackson, Tennessee 38302
Phone: 731-424-2030 • www.jmcaacc.org • Email: jacksonmcaacc@gmail.com

Mission Statement

The Jackson-Madison County African American Chamber of Commerce will promote and assist the economic growth and development of member businesses and will offer job and entrepreneurial training and employment for local youth. We will have a positive impact on the business community as well as the Jackson and surrounding communities as a whole through a community development and capacity building process that increases housing, education, recreation and economic opportunities.



MEMBERSHIP APPLICATION

(See Page 3 for details on Membership Categories)

CATEGORY A (at least 51% owned by African American) **ANNUAL FEE = \$250.00**
CATEGORY B (Corporate Member) **ANNUAL FEE = \$1500.00**
CATEGORY C (Non-Business Organization) **ANNUAL FEE = \$200.00**
CATEGORY D (Corporate Professional) **ANNUAL FEE = \$250.00**
CATEGORY E (Supporter) **ANNUAL FEE = \$100.00**

Date _____

Membership Category _____

LICENSE & BUSINESS INFORMATION

Business License # _____ Fed. Tax ID # _____
State Employer Tax ID # _____ SIC Code(s) _____
TAC _____ Professional License # _____

Name of Business: _____

Owner/ Contact Person: _____

Business Mailing Address: _____

City: _____ State: _____ Zip: _____

Business Phone: _____ Business Fax: _____ Days & Hours: _____

Cell Phone: _____ Email: _____ Website _____

Business Structure:

☐ Sole Proprietorship ☐ Partnership
☐ Joint Venture ☐ Non-Profit
☐ Corporate ☐ Other

Dues are effective for one-year period effective from the date payment is received.

Number of Employees/Membership _____ Year Business Established _____

Description of Business and Products/ Service Provided:

☐ Office Services ☐ Manufacturer ☐ Retail ☐ Bldg. Maintenance
☐ Equipment Maintenance/Service ☐ Wholesale ☐ Consultant

☐ Beauty/Barber ☐ Service Industry ☐ Construction

Other _____

Please list Specific Services and/or Products Offered by Your Business:

Training or Technical Assistance Needs: ☐ (1) Preparation of Financial Statements

☐ (2) Marketing ☐ (3) Business Planning ☐ (4) Source of Financing

☐ (5) Internal Management (Finance and Personnel)

☐ (6) Tax Preparation (Federal, States, & Local)

(7) Other _____

Community Economic Concerns _____

What areas of service to the JMCAACC are of interest to you? ☐ Fundraising

☐ Tourism ☐ Advocacy/Education ☐ Youth ☐ Economic Development

Committees: ☐ Business Development ☐ Follow Me into Business®/STEM

☐ Golf ☐ Jewel Awards ☐ Membership and Member Recruitment ☐ Retreat

Communication Preference

What is your preferred way to receive information about chamber activities and opportunities for your business?

☐ Email ☐ Fax ☐ Phone ☐ Postal Mail

Send completed application and check for membership dues to the following address:

JMCAACC
P.O. Box 703
Jackson, TN 38302-0703
Phone: 731.424.2030 • www.jmcaacc.org
jacksonmcaacc@gmail.com

Membership Categories & Fees

The following categories of members, (and perspective membership investments), have been adopted in the by-laws of JMCAACC:

CATEGORY A

Regular members shall consist of businesses which are, at least, 51% owned and operated by Black persons. Regular members are the only voting members of the Chamber.

Fee: \$ 250.00 annually

CATEGORY B

Corporate member will consist of businesses and corporations which support the economic development of Black owned businesses but are not themselves owned by Black persons.

Fee: \$ 1,500.00 annually

CATEGORY C

Non-Business Organization members will consist of organizations, (non-business) and places of worship.

Fee: \$ 200.00 annually

CATEGORY D

Corporate Professional members will consist of corporate professionals and employees who wish to sell their product and network with Black business owners.

Fee: \$ 250.00 annually

CATEGORY E

Supporters will consist of individuals who may or may not own businesses but support the economic development of Black owned businesses. This category shall be listed by individual name and not business involvement and shall receive limited benefits.

Fee: \$ 100.00 annually