



## New Member Application

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

**Please print your name as you want it to appear in the membership directory.**

Name of Business: \_\_\_\_\_ Type of Business: \_\_\_\_\_

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

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

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Business Phone: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

**Please return form to:**

St. Petersburg Women's Chamber of Commerce  
P.O. Box 980  
St. Petersburg, FL 33701

The cost of the annual membership is \$48.00.

Name Badge: \$8.00 (you can order online)

Annual Membership + name badge: \$56.00

**Name as it should appear on Badge:** \_\_\_\_\_

Paid by

☐ Cash

☐ Check

☐ Credit Card