



## Pittsburg-Camp County Chamber of Commerce Membership Application

Business/Member Name: \_\_\_\_\_ Contact Name: \_\_\_\_\_

Street Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Billing Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

Website: \_\_\_\_\_ Facebook page: \_\_\_\_\_

No. of Employees: (Full time) \_\_\_\_\_ (Part-time) \_\_\_\_\_ (2 part time employees = 1 full time employee)

### Member Classification and Rates: (Please Check)

- |   |   |
|---|---|
| <input type="checkbox"/> Non-profit, Civic Clubs, Churches \$75 | <input type="checkbox"/> Individual (non-business related) \$50             |
| <input type="checkbox"/> Level 1: 1-2 employees \$100           | <input type="checkbox"/> Level 2: 3-10 employees \$165                      |
| <input type="checkbox"/> Level 3: 11-20 employees \$200         | <input type="checkbox"/> Level 4: 21-49 employees \$250                     |
| <input type="checkbox"/> Level 5: 50-74 employees \$700         | <input type="checkbox"/> Level 6: 75-100 employees \$750                    |
| <input type="checkbox"/> Level 7: 101+ employees \$800          | <input type="checkbox"/> Educational Institutions/Government Agencies \$100 |

Membership is on a calendar-year basis. Members are invoiced on Dec. 1 for the following year. Pro-rated rates apply for new members who join after April 30.

### Business Categories: (List up to 3)

1) \_\_\_\_\_ 2) \_\_\_\_\_ 3) \_\_\_\_\_

Business Type/Product Description: (Provide a description of the products and services your business or organization offers. No more than 50 words. This description will appear with your Web listing.)

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Additional employees to add to email list for chamber event info/newsletter:

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

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

Important Note: Membership in the Pittsburg-Camp County Chamber of Commerce is continuous until an individual member or primary voting representative of the company rescinds membership in writing or does not renew membership prior to April 30. Please sign below as acknowledgment of this policy.

As a member, I understand this policy and agree to abide by the Constitution and Bylaws of the Chamber organization.

Signature: \_\_\_\_\_

Return completed application and payment to:  
202 Jefferson St. Pittsburg, TX ❖ 903-856-3442 ❖ (fax) 903-856-3570  
info@pittsburgcampcountychamber.com www.pittsburgcampcountychamber.com