



## MEMBERSHIP APPLICATION

Date of Application \_\_\_\_\_

Company \_\_\_\_\_

(Circle One)

Contact Name **Mr. /Mrs. /Ms.** \_\_\_\_\_

Location Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Mailing Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Primary Phone Number \_\_\_\_\_ Fax \_\_\_\_\_

Primary E-mail Address \_\_\_\_\_

Web Site Address \_\_\_\_\_

Membership Directory Category \_\_\_\_\_

Membership Sponsor \_\_\_\_\_

Primary Reason for Joining:  Networking  Referrals  Promote Strong Local Economy

Political Action  Other \_\_\_\_\_

License # for Business Members \_\_\_\_\_ city or county of \_\_\_\_\_

Home Based Business Occupancy Use Permit # \_\_\_\_\_

Signature \_\_\_\_\_

### **Membership Investment:**

Employees: Full-time \_\_\_\_\_ Part-time \_\_\_\_\_

### **Membership Investment:**

Retired \$ 50.00  
Nonprofit \$100.00  
Home-Based \$100.00  
Business \$100.00

No. of Employees: Full-time \_\_\_\_\_ Part-time: \_\_\_\_\_

Investment Amount Enclosed \$ \_\_\_\_\_

Payment: Cash \_\_\_\_\_ Check \_\_\_\_\_

**Please mail your completed application with payment to:**

Patterson-Westley Chamber of Commerce, PO Box 365, Patterson, CA 95363  
<http://www.pattersonwestleychamber.org> E-mail: [info@pattersonwestleychamber.org](mailto:info@pattersonwestleychamber.org)  
209-894-7900