



# Alamosa County Chamber of Commerce Membership Application

**Date:** \_\_\_\_/\_\_\_\_/\_\_\_\_

**Business/Organization Name:** \_\_\_\_\_

**Contacts:**

President/Owner: \_\_\_\_\_ Manager/Director: \_\_\_\_\_

Primary Contact Name: \_\_\_\_\_ Title \_\_\_\_\_

**Primary Contact Email:** \_\_\_\_\_

**Addresses:**

Physical Address: \_\_\_\_\_

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

Mailing Address (if different): \_\_\_\_\_

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

**Other:**

Phone: (\_\_\_\_) \_\_\_\_\_ Toll-Free Phone: (\_\_\_\_) \_\_\_\_\_

Fax: (\_\_\_\_) \_\_\_\_\_

**Website:** \_\_\_\_\_

**Does your business have a Facebook page?** Yes\_\_ No\_\_ Facebook: \_\_\_\_\_

Brief Description of Business / Organization: (*use back if needed*) \_\_\_\_\_

**Credit Card Information** — **For security reasons if this application will be mailed, or if you just prefer not to include your number here, please call the Chamber Office with you CC number.**

Type of Card Visa \_\_\_\_\_ Master Card \_\_\_\_\_

Card Number \_\_\_\_\_

Expiration \_\_\_\_/\_\_\_\_

Security Number \_\_\_\_\_ Billing Zip Code \_\_\_\_\_

**Annual Dues:**

- Individual Membership
- Non-Profit Membership (*see below*)
- Associate Membership \$100

# Employees:	General Membership	Non-Profit Membership
<input type="checkbox"/> 1-5	\$200	\$100
<input type="checkbox"/> 6-10	\$275	\$125
<input type="checkbox"/> 11-20	\$350	\$175
<input type="checkbox"/> 21-30	\$475	\$300
<input type="checkbox"/> 31-50	\$650	\$325
<input type="checkbox"/> 51-75	\$850	\$500
<input type="checkbox"/> 75-plus	\$1100	\$550

**Serving Alamosa since 1923**

*This investment is payable and is continuous unless canceled in advance of the due date. These dues are not deductible as charitable contributions, but may be used as necessary business expenses. The Chamber is not a charity organization, but serves as an advocate organization for area businesses.*

*Application shall be regarded as a guarantee on the part of the applicant of its interest in and sympathy with the purposes of the Chamber and of its adherence, if accepted, to its bylaws and articles of incorporation.*

*I have read and understand the above statement:*

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

**610 State Avenue, Alamosa, Colorado 81101  
719-589-3681—www.alamosa.org**