

BOCA GRANDE AREA CHAMBER OF COMMERCE MEMBERSHIP APPLICATION

For the purpose of advancing the general welfare and prosperity of the Boca Grande Area so that its citizens and all areas of its business shall prosper, the undersigned hereby makes application for membership in the Boca Grande Area Chamber of Commerce for one year, and to continue in effect until otherwise notified in writing. Membership year runs January 1st through December 31st.

Business Name: _____

Phone: _____ Alt Phone _____

Email: _____

Web Site: _____

Principal Owner(s): _____ Title: _____
_____ Title: _____

Street Address: _____

City: _____ State: ____ Zip: _____

Mailing Address (if different from above)

_____ Description of Business/Profession:

_____ Membership Category (see attached sheet):

_____ Rate: _____

Copy of Business License enclosed Y N Number of Employees: _____

Sponsorship by current BGACC Member OR Business References & contact information if applicable:

Name of person to receive all Chamber mailings:

Member of other Chambers: NO ____ YES ____

Location: _____

DISCLOSURE STATEMENT:

Annual dues are a necessary business expense. Dues are not a tax-deductible donation.

CODE OF ETHICS/MEMBERSHIP AGREEMENT:

To cooperate with the Chamber on trade practice programs relating to the industry in which we are involved.

To adhere to simple truth and integrity in advertising and all transactions.

To stand behind the merchandise/products/services sold. To provide service after the sale.

To provide prompt attention to guarantee/warranty work.

To respond promptly to any complaint, with all effort to reaching a mutually satisfying agreement.

To support the Boca Grande Area Chamber of Commerce.

To explain its concept and recommend its usage to all prospective customers/members.

To use the Chamber name only as authorized by the Board of Directors, after formal notice of membership approval is received.

Authorized Signature

Date