



# Penn Valley Area Chamber of Commerce Membership Application Form

**RETURN THIS FORM WITH YOUR 2019/20 MEMBERSHIP DUES**

**1** Please provide us with some basic information so we may properly open your membership account.

Your Name \_\_\_\_\_  
 Name of Business/Organization \_\_\_\_\_  
 Type of Business (services rendered, goods sold, etc.) \_\_\_\_\_

Name of Contact Person (manager) \_\_\_\_\_  
 Business Address (location) \_\_\_\_\_ City, Zip \_\_\_\_\_  
 Mailing Address (if different) \_\_\_\_\_ City, Zip \_\_\_\_\_  
 Contact Phone Number (Days) ( ) \_\_\_\_\_ Fax ( ) \_\_\_\_\_  
 Contact Phone Number (Evenings) ( ) \_\_\_\_\_ Cell ( ) \_\_\_\_\_  
 E-mail Address \_\_\_\_\_  
 Web Address \_\_\_\_\_

How did you learn of the Chamber?

Are you interested in having a ribbon cutting ceremony	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	
Are you interested in having an article appear in the Chamber newsletter?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	
Do you want a membership plaque?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	
If you have a current membership plaque, do you request a 2019 sticker for the plaque?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	

**2** Select the desired membership from the following list of classifications and dues. PVACOC renews memberships annually. Below are the annual dues.

Membership Type	Annual Dues
<b>Business Membership Options</b>	
Business	<b>\$125.00</b>
2-5 Employees/Associates	<b>\$160.00</b>
6-9 Employees/Associates	<b>\$180.00</b>
10-15 Employees/Associates	<b>\$190.00</b>
Government Membership	<b>\$105.00</b>
Non-Profit Membership	<b>\$80.00</b>
Assoc. Bus. Employee Membership	<b>\$80.00</b>
Individual Membership (Non-Business)	<b>\$55.00</b>
Supporter Membership (non-voting)	<b>\$30.00</b>

*Membership enrollment period is for one year. If you are joining with 2-5, 6-9, or 10-15 employees, please use backside of this form to list your employees.*

**3** Please make checks payable to: Penn Valley Area Chamber of Commerce or PVACOC  
 Include your check with this form. Your cancelled check will be your receipt.

**4** Please sign and date this form

Your Signature \_\_\_\_\_ Today's Date \_\_\_\_\_

**5** Mail to:

**Penn Valley Area Chamber of Commerce  
 PO Box 202, Penn Valley, CA 95946**



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List Employees 2 to 5

2.  
3.  
4.  
5.

List Employees 6 to 9

6.  
7.  
8.  
9.

List Employees 10 to 15

10.  
11.  
12.  
13.  
14.  
15.