



7001 N. Oak Trafficway, Ste. 101 Gladstone, MO 64118
 P. 816-436-4523 / F. 816-436-4352
 www.gladstonechamber.com

PLEASE PRINT EXACTLY AS IT SHOULD APPEAR IN THE CHAMBER MEMBERSHIP DIRECTORY

Business / Organization Name _____
 Main Representative _____
 Representative Title _____
 Phone _____ Fax _____ Cell _____
 Website _____ Email _____
 Additional Representative _____
 Email _____ Phone _____
 Full Time Employees _____ Part Time (2 PT = 1 FT) _____
 Total Number of Employees _____

Physical Address
 Street _____
 City _____ State _____
 Zip _____
 Billing/Mailing Address (if different)
 Street _____ PO Box _____
 City _____ State _____
 Zip _____

CHAMBER MEMBERSHIP LEVELS

Individuals (with no business affiliation)		
\$100		
Churches and Civic Organizations		
\$160		(1 Representative)
Business Membership		
\$270	1-20 Employees	(1 Representative)
\$370	21-50 Employees	(1 Representative)
\$480	51-100 Employees	(1 Representative)
\$840	100 + Employees	(4 Representatives)
Schools		
Private/Non-Profit	\$340	(2 Representatives)
Public	\$525	(4 Representatives)
Banks/Financial Institutions/Media		
\$498		(2 Representatives)
Utilities		
\$970		(5 Representatives)

TOTAL CHAMBER INVESTMENT

Membership Investment	\$ _____
Additional Representatives	\$ _____
<i>Additional business representatives may be added to the membership listing for \$100 per individual. Please list additional representatives in the spaces above or on an attached sheet. Additional reps will be added to the online directory.</i>	
One Time Administration Fee	\$ 25.00
<i>(All new memberships are subject to a one time fee of \$25.00.)</i>	
Total Amount	\$ _____

How did you learn about the Gladstone Area Chamber of Commerce? _____

Please mail application and payment to the chamber office at the address above. If you have questions call Amy at 816-436-4523.

<p>Payment Options</p> <p><input type="checkbox"/> Cash</p> <p><input type="checkbox"/> Check # _____</p> <p><input type="checkbox"/> Charge</p>	<p>Charge Details</p> <p><input type="checkbox"/> MasterCard Card Number _____ Expiration Date ____/____</p> <p><input type="checkbox"/> Visa Signature _____ 3-Digit V Code _____ (on back of card)</p> <p><input type="checkbox"/> Discover</p>
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