



# Membership Application

It is important to keep your information current.

Contact Margeaux Clark with any updates!

### About your Business (Please fill in all fields):

Date: \_\_\_\_\_ # Employees: \_\_\_\_\_ (2 part time=1 full-time)

Company Name: \_\_\_\_\_  Keep my Address Private

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

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

Phone (Main): \_\_\_\_\_ Website: \_\_\_\_\_ Email: \_\_\_\_\_

### Primary Contact (Please fill in all fields):

Primary Contact: Salutations (Required. Please Choose one)  Mr.  Mrs.  Ms.  Dr.  Other \_\_\_\_\_

Name (First, Last): \_\_\_\_\_ Title: \_\_\_\_\_

Direct Line: \_\_\_\_\_ or Ext. #: \_\_\_\_\_ Email: \_\_\_\_\_

### Billing Contact (If different from Primary Contact): My billing address is different and someone should contact me.

Billing Contact: Salutations (Required. Please Choose one)  Mr.  Mrs.  Ms.  Dr.  Other \_\_\_\_\_

Name (First, Last): \_\_\_\_\_ Title: \_\_\_\_\_

Direct Line: \_\_\_\_\_ or Ext. #: \_\_\_\_\_ Email: \_\_\_\_\_

### About your Business - For additional Categories, contact Margeaux Clark a [mclark@pwchamber.org](mailto:mclark@pwchamber.org)

Business Category/Industry: (1) \_\_\_\_\_ (2) \_\_\_\_\_  
*(Ex.: Bank, Real Estate, IT, Accounting, Restaurant, Retail...see add'l categories in the "Member Directory" section of pwchamber.org)*

Business Type (Check all that apply):  Women Owned  Veteran Owned  Minority Owned  
 Hispanic Owned  Homebased  501 \_\_\_\_\_  8A  
 Federal Contractor  State Contractor  Local Contractor  Other \_\_\_\_\_

### Areas of Interest

Check all that apply to be included on mailing lists and receive more information.

#### Committees

- Economic Development
- Education & Workforce
- Policy

#### Councils

- Government Contracting
- Health & Wellness
- Hispanic
- Not-for-Profit

- Technology & Security
- Tourism & Hospitality
- Veterans
- Women's Leadership

#### Learn more about:

- Chamber Orientation
- Chamber Check-Up
- Social Media
- Sponsorship Opportunities

### How did you learn about the Chamber?

Check all that apply. Check at least one.

- Chamber Website
- Social Media
- Print ad in: \_\_\_\_\_
- Referred by (Name/Business) \_\_\_\_\_
- Other: \_\_\_\_\_
- I don't remember

**Keep us updated!**

Visit [www.pwchamber.org](http://www.pwchamber.org) to create a username and password. All employees can be listed on our website and receive Chamber Benefits! Contact Margeaux Clark with any questions: [mclark@pwchamber.org](mailto:mclark@pwchamber.org) // 571-765-1878

**Calculate your membership Investment:**  
(2 part-time employees = 1 full-time employee)

**CHAMBER TAX ID 27-2875613**

**Step 1** ~ Pick your membership level based on Business Type and Number of Employees \$\_\_\_\_\_

For-Profit Business Membership

(First/Only Location)

# of Employees	Price
1 (Just me!)	\$405
2-5	\$465
6-15	\$575
16-24	\$775
25-75	\$890
76-100	\$1,115
101 or more	\$1,445

Not-for-Profit Organization

# of Employees	Price
0	\$265
1-15	\$405
16 or more	\$615

Restaurants

Flat Rate	\$465
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*(These prices include a one time registration fee of \$40)*

**Step 2** ~ Considered a Membership Upgrade (optional) \$\_\_\_\_\_

Standard Upgrade .....\$200

-Includes Diamond Member Program

-Select one:

8-hours of conference room use

Standard Membership Mailing List

(Excel format, 1200+ mailing addresses, emails not included)

Diamond Member Program....\$100

- Contact Margeaux Clark to learn more

[mclark@pwchamber.org](mailto:mclark@pwchamber.org) // 571-765-1878

Deluxe Upgrade ..... \$350

- Includes Diamond Member Program

- 8-hours of conference room use

- Deluxe Mailing List

(Excel format, 1200+ mailing addresses, websites, main category and # of Employees)

**Own multiple businesses or have multiple locations?**

Multi-Membership discount offered.  
Contact Heather Stietzel for more details: [hstietzel@pwchamber.org](mailto:hstietzel@pwchamber.org) // 571-765-1880

**Payment Method:**

**Step 3** ~ Calculate your Total Investment \$\_\_\_\_\_

Select one:  Credit Card (all cards accepted)

Check # \_\_\_\_\_

Cash

CC # \_\_\_\_\_ Exp \_\_\_\_/\_\_\_\_ Name on Card: \_\_\_\_\_

**Renewal Option:**

Automatic Membership Renewal

Contact Anita Duecaster with questions: [aduecaster@pwchamber.org](mailto:aduecaster@pwchamber.org) // 571-765-1874

**Make it official:**

By signing below, I agree to the following code of ethics as a member of the Prince William Chamber:

As a member of the Prince William Chamber of Commerce, I agree to represent and conduct my business, products and services in an ethical manner with all customers, vendors, associates, employees and fellow businesses.

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

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