MEMBERSHIP APPLICATION

ORANGEBURG COUNTY CHAMBER OF COMMERCE

P. O. Box 328 – Orangeburg, South Carolina 29116

803-534-6821 ~Fax 803-531-9435 ~ www.orangeburgchamber.com ~ chamber@orangeburgsc.net

I (We) hereby apply for membership in the Orangeburg County Chamber of Commerce to help carry on the economic and civic growth and improvement of Orangeburg County. My membership will run one year and until written resignation is submitted. $1.00 of my annual dues is a subscription to *Onward Orangeburg County* for one year.

FOR OFFICE USE:
Date:_____ Mbr#_____
Cat:_____ Indent:_____

FOR OFFICE USE:
Period:_____
Amt.:_____ Chk#:_____
Credit Card:_____

Name_____Contact Person_____Title_____

PO Box/Street Address_____City_____State_____Zip_____

Phone_____WebSite_____FAX_____Email_____

Type of Business_____Number of Employees: Full-Time_____ Part-Time_____

I will pay my dues: Annually_____ Semi-Annually_____ Amount_____ Check_____Invoice_____

__Master Card__Visa Acct. Name_____Acct. #_ _ _ _-_ _ _ _-_ _ _ _-_ _ _ _ Amount_____Exp.Date_____

Representative(s) (One per membership base):
__Mr. __Mrs. __Ms. _____Title_____

__Mr. __Mrs. __Ms. _____Title_____

NEWSLETTER INFORMATION

Contact Person(s) and Title(s)_____

Number of Years In Business, Profession or Service_____

Services/Products Offered_____

What would you like other Chamber members to know about you?_____

Summary of Your Business Description: _____

Business Goal: _____

BUSINESS & PROFESSIONAL GUIDE INFORMATION

The Chamber's Business & Professional Directory is updated bi-annually. Please check name, mailing address, location and telephone number to be included in the publication. Please select two categories under which you would like to be listed (a list is attached). If the information provided changes at any time, please contact the Chamber so that your business will continue to be listed correctly in the publication.

Name_____ Business Name_____

Mailing Address_____ Street Address_____

City/State/Zip_____Telephone_____Web_____Email_____

Categories (You may be listed under two categories) Category 1_____Category 2_____

DUES SCHEDULE FOR MEMBERSHIP CLASSIFICATIONS

BUSINESSES:

Up to 25 employees	**$275.00**
21-50 employees	**$525.00**
50-100 employees	**$775.00**
101-200 employees	**$1,025.00**
More than 200 employees	**$1,525.00**

START-UP BUSINESSES:

1st Year	**$150.00**
2nd year	**$225.00**

FARMS:	**$200.00**
NON-PROFIT 501-C-3:	**$150.00**
INDIVIDUAL:	**$150.00**
(Under a Chamber Business)	
RETIREE:	**$50.00**