



# MEMBERSHIP APPLICATION

553 Glover Avenue, Enterprise, AL 36330  
334.347.0581 | www.EnterpriseAlabama.com



**Welcome!** Please tell us about your business or organization.

**Company Name:** \_\_\_\_\_ **Year Est./Anniversary Date** \_\_\_\_\_

**Physical Address** (*published in directory*): \_\_\_\_\_

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

**Mailing Address** (*if different from above*): \_\_\_\_\_

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

**Company Phone:** \_\_\_\_\_ **Company Website:** \_\_\_\_\_

**Main Contact:** \_\_\_\_\_ **Title:** \_\_\_\_\_ **E-mail:** \_\_\_\_\_

*(Main contact is listed in Enterprise Chamber public directory and receives all Chamber mailings and e-communications.)*

**Total # of Full-Time Employees:** \_\_\_\_\_ **Total # of Part-Time Employees:** \_\_\_\_\_

**Type of Business/Business Category:** \_\_\_\_\_

**Company Description** (*briefly list goods and/or services to be published in public directory on our website*):  
\_\_\_\_\_  
\_\_\_\_\_

**Billing Info** (*if different from above please fill out details below*):

**Billing Contact:** \_\_\_\_\_ **Title:** \_\_\_\_\_

**Email:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Company Name** (*if name listed above is a d/b/a*): \_\_\_\_\_

**Do you have a current business license with the City of Enterprise?** (*circle one*): **YES** **NO**

**Did anyone refer you to join the Chamber?** (*if so please list name*): \_\_\_\_\_

### Additional Info:

**Primary reason(s) you are joining the Enterprise Chamber of Commerce** (*check all that apply*):

- Networking & Professional Development**  **Business Education**  **Marketing/Visibility**
- Economic Development & Services**  **Chamber Events**  **Membership Benefits & Services**
- Other** (*please list reasons*): \_\_\_\_\_

**Are you interested in volunteering for any of the events/committees below?** (*check all that apply*):

- Boll Weevil Fall Festival**  **St. Patrick's Day Parade/Half Pint 0.5K**  **Christmas Parade**
- Senior Living Expo**  **Ambassadors**  **Tourism**  **Military & Veterans Affairs**  **Not Yet**

**Would you like to be contacted to schedule a Ribbon Cutting Ceremony** (*circle one*): **YES** **NO**

**Thank you for your support! Please return your completed application and payment** (*investment schedule is listed on the back*) **to the Chamber. Your application will be processed and a Chamber representative will contact you soon.**

**Signature of authorized representative:** \_\_\_\_\_

**Date Signed:** \_\_\_\_\_



# ANNUAL INVESTMENT 2023



## GENERAL BUSINESS MEMBERSHIP

(2 part-time employees = 1 full-time employee)

NUMBER OF EMPLOYEES	INVESTMENT RATE
1-5	\$245
6-10	\$285
11-25	\$375
26-50	\$450
51-100	\$575
101-250	\$700
251-500	\$980
501+	\$1,190

## FINANCIAL INSTITUTIONS MEMBERSHIP

(Deposits per million applies to Banks & Credit Unions)

DEPOSITS	INVESTMENT RATE
Less than \$25 Million	\$595
\$26 to \$50 Million	\$890
\$51 to \$75 Million	\$1,190
\$76 to \$100 Million	\$1,720
\$101 Million	\$2,080
Other Financial Business	\$295

(Loan Production, Mortgage Company or Brokerage)

## OTHER MEMBERSHIP INVESTMENT RATES

Non-Profit Organization \$100  
*\*Includes: Charitable Organizations, Churches, Private Foundations, etc. recognized by IRS.*

Real Estate Associate Membership \$75  
*\*Must be agent licensed under current member brokerage.*

Friend of the Chamber \$75  
*\*Any person not representing a business, firm, corporation, association, non-profit, etc.*

### OFFICE USE ONLY

PAYMENT TYPE:  Cash  Check (Check # \_\_\_\_\_)  Credit Card (An Invoice will be sent to you via e-mail)

Date Processed \_\_\_\_\_ Staff Member \_\_\_\_\_