



# Moreno Valley Chamber of Commerce

22500 Town Circle • Suite 2090 • Moreno Valley, CA 92553 • E-mail: info@movalchamber.org • Web: www.movalchamber.org

For office use only:  
Date Received: \_\_\_/\_\_\_/\_\_\_  
Plaque received: \_\_\_/\_\_\_/\_\_\_

## Membership Application

Please Type or Print Clearly

Date \_\_\_\_\_

Retail       Professional / Service Industry       Manufacturing / Distribution

Mr.       Mrs.       Ms.       Dr.

Contact Name: \_\_\_\_\_

Title: \_\_\_\_\_

Firm Name: \_\_\_\_\_

Firm Address: \_\_\_\_\_

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

Mailing Address (if different): \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_

Fax: (\_\_\_\_) \_\_\_\_\_

Permission to receive Chamber of Commerce Faxes- unsolicited: Yes      No

List Fax: Yes      No

Web Address: \_\_\_\_\_

E-mail: \_\_\_\_\_

Number of Employees: \_\_\_\_\_ Full time \_\_\_\_\_ Part time \_\_\_\_\_

Date Business Started \_\_\_/\_\_\_/\_\_\_

Classification (As listed in the Yellow Pages): \_\_\_\_\_

Referred by: \_\_\_\_\_

Company: \_\_\_\_\_

Membership Status	Annual Investment*
Small Business      1-5 employees	\$225.00
Medium Business      6-19 employees	\$295.00
Large Business      20+employees	\$475.00
Home Based Business	\$180.00
Non-Profit Organization	\$160.00
Individual (No promotion of business, product or organization)	\$90.00
Retired Individual (Same rules as Individual)	\$50.00
Associate Member	\$140.00
<i>*Annual Investment Rates are subject to review and may be adjusted</i>	

### AMOUNT ENCLOSED:

Annual Membership Investment (see schedule above) \$ \_\_\_\_\_  
 Processing Fee \$ 30  
 Multiple Location Fee for second location add \$150 \$ \_\_\_\_\_  
 3rd and up locations add \$50 per location \$ \_\_\_\_\_

TOTAL.....\$ \_\_\_\_\_

### Method of Payment

Check Attached\* (#)      MasterCard      Visa      Other

\*Make checks payable to Moreno Valley Chamber of Commerce

Card # \_\_\_\_\_ Exp. \_\_\_\_\_

Name on Card \_\_\_\_\_

Signature \_\_\_\_\_ Title \_\_\_\_\_

I hereby apply to join the Moreno Valley Chamber of Commerce, and upon acceptance and payment of dues, will be eligible for all rights and benefits of membership.

\_\_\_\_\_  
 Chamber Representative Signature      Date      Member Signature      Date