

COCONUT GROVE CHAMBER MEMBERSHIP APPLICATION



PROMOTE YOUR BUSINESS

- ❖ Promote your business and increase your customer base
- ❖ Leadership and learning opportunities
- ❖ Networking, business and community involvement
- ❖ Member benefits and discounts

WE'RE HERE TO HELP!

Coconut Grove Chamber of Commerce is dedicated to **ADVANCING** the economic growth of our community, **IMPROVING** the business environment, **ADVOCATING** on behalf of our members and **EDUCATING** through seminars, publications and business planning and mentoring.

It is through member participation that the Chamber succeeds at supporting our community.



COCONUT GROVE CHAMBER OF COMMERCE MEMBERSHIP APPLICATION

MEMBERSHIPS are held in the name of the company/business/firm except for individual memberships. One person will represent the company/business/firm as its official Chamber Member and will receive all communiques, voting privilege, and serve on committees. Additional representatives are included with higher level memberships.

Member Name: _____ Title: _____

Business Name: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone #1: (____) _____ Phone #2: (____) _____ Fax: (____) _____

Email: _____ Website: _____

Type Of Business: _____ Year Founded: _____ No. of Employees: _____

Additional Information: _____

CONTACT US TODAY!
305.444.7270

2701 South Bayshore Dr, Suite 300 | Coconut Grove, Florida 33133
Fax: 305.444.2498 | Email: info@coconutgrovechamber.com



COCONUT GROVE CHAMBER OF COMMERCE MEMBERSHIP APPLICATION

PLEASE SELECT CATEGORY | Processing fee for 1st time or expired membership reinstatement is **\$25.00** (waived at Trustee Level).

TRUSTEE LEVEL

- Foundation Level - \$5,000
- Up to 6 representatives
- Ruby Level - \$2,500
- Up to 5 representatives
- Diamond Level - \$1,500
- Up to 4 representatives
- Emerald Level - \$1,000
- Up to 3 representatives

BUSINESS LEVEL

- Platinum Level - \$550
- Up to 3 representatives
- Gold Level - \$375
- Up to 2 representatives
- Silver Level - \$250
- Up to 1 representative

RESTAURANT & RETAIL LEVEL

- \$250 + \$100 Gift Cards (per restaurant or retailer)
- Up to 1 representative

INDIVIDUAL LEVEL

- Friend Of The Chamber - \$150
- Up to 1 representative

NON-PROFIT LEVEL

- Small Non-Profit \$150
- Up to 1 representative
- Large Non-Profit \$250
- Up to 1 representative

PAYMENT INFO

Amount: \$ _____ + Application Fee of **\$25** = Total: \$ _____

Method of Payment: Cash Check (Check #: _____) Visa MasterCard AMEX

Card #: _____ Exp. Date: ____/____/____ Security Code (back of card): _____

Name On Card: _____ Signature: _____

Billing Address: _____ City: _____ State: _____ Zip: _____

I agree to pay the total amount according to the card issuer agreement. YES NO

CONTACT US TODAY!
CONTACT US TODAY!
305.444.7270

2701 South Bayshore Dr. Suite 300 | Coconut Grove, Florida 33133
2701 South Bayshore Dr. Suite 300 | Coconut Grove, Florida 33133
Fax: 305.444.2498 | Email: info@coconutgrovechamber.com



COCONUT GROVE CHAMBER OF COMMERCE MEMBERSHIP APPLICATION

Please note that memberships are non-refundable. Please call our office at 305-444-7270 if you prefer to handle charge by phone

ADDITIONAL **INFO:** Help us learn more about you and your business (check as many as apply).

My Business Is:

- Sole Proprietorship
- Branch or Affiliate
- Under 10 Employees
- 10-20 Employees
- 20+ Employees
- Home-Based
- Female-Owned
- Minority-Owned

I Am:

- Self-Employed
- Freelance
- Independent Contractor
- Retired
- College Student

I Belong To The Following Organizations:

- Greater Miami Chamber of Commerce
- Coral Gables Chamber of Commerce
- Other Chambers of Commerce: _____
- Coconut Grove BID
- Referral Group
- Rotary Club
- Women's Club
- Other Professional Organizations _____

Please Indicate If You Are Available To Volunteer For:

- Networking Cocktail Events
- Luncheons
- Special Events
- Committees

Would You Like To Join Our Membership To Membership Appreciation Program?

- YES!
- No

If So, What Percentage Would You Be Willing To Give?

- 10%
- 15%
- 20%
- 25%
- Other: _____%

Discount Towards:

- Goods
- Services

CONTACT US TODAY!
305.444.7270

2701 South Bayshore Dr, Suite 300 | Coconut Grove, Florida 33133
Fax: 305.444.2498 | Email: info@coconutgrovechamber.com



COCONUT GROVE CHAMBER OF COMMERCE

Thank you for your support of the Coconut Grove Chamber of Commerce. Please make a copy of this application for your records. When mailing in completed form, you need only send in pages 2-3. Page 4 is needed **ONLY** if you have additional members.

ADDITIONAL INFO CONT.

For all Gold-Level and above members, please list additional representatives to be included under your membership:

Name: _____ Title: _____

Email: _____ Phone: _____

Name: _____ Title: _____

Email: _____ Phone: _____

Name: _____ Title: _____

Email: _____ Phone: _____

Name: _____ Title: _____

Email: _____ Phone: _____

Name: _____ Title: _____

Email: _____ Phone: _____

Name: _____ Title: _____

Email: _____ Phone: _____

*Additional Representative Summary:
(number indicates **total** number of
representatives allowed)*

- Gold Level - 2
- Platinum Level - 3
- Emerald Level - 3
- Diamond Level - 4
- Ruby Level - 5
- Foundation Level - 6

CONTACT US TODAY!
305.444.7270

2701 South Bayshore Dr, Suite 300 | Coconut Grove, Florida 33133
Fax: 305.444.2498 | Email: info@coconutgrovechamber.com