

*Ottawa Area Chamber of Commerce & Industry  
2008 New Member Application (Page 1)*

Name of Business \_\_\_\_\_ Application Date \_\_\_\_\_  
Physical Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Business Phone (Main) \_\_\_\_\_ Fax \_\_\_\_\_ Website \_\_\_\_\_

***The Choice for my Business/Organization***

*Not including a la carte sponsorship opportunities to customize my investment.*

- Diamond Member (\$5100), *Ideal for 150+ employees*
- Gold Member (\$1900), *Ideal for 50-150 employees*
- Silver Member (\$975), *Ideal for 25-50 employees*
- Bronze Member (\$474), *Ideal for 10-25 employees*
- Professional Member (\$295), *Ideal for up to 10 employees*
- I have no business affiliation and would like to support the Chamber as an Individual or Clergy Member (\$90)
- This is a "Non-Profit" organization, please take 35% off
- This qualifies as a "Home-Based" business, please take 25% off
- This qualifies as an "Affiliate" business, please take 50% off \*

*\*Applies to any business affiliated with a current member business under a different name and/or location (i.e. branch office or a single owner with multiple businesses).*

*For your convenience, all annual membership investment levels are customizable, upgradeable and automatically renewable.*

Primary Contact or Owner Signature \_\_\_\_\_ Date \_\_\_\_\_

*(Please complete reverse side)*

***Preferred Billing Frequency***

**Please submit your application for approval by the Board.**

- Please invoice me for my annual investment  
*(Payment will be made within 30 days of the invoice)*
- Charge my bank account (No additional fee)  
*(Please enclose a voided check)*
- \_\_\_\_ Monthly
- \_\_\_\_ Quarterly
- \_\_\_\_ Semi-Annually



***Go Green Today for a Greater Tomorrow***

- Check this box if it is OK to email your invoices.

Email to: \_\_\_\_\_

*The policy of the Ottawa Area Chamber is to provide mailing list info including phone, fax and email to members and others that request it.*

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Brief Description of Products/Services \_\_\_\_\_  
\_\_\_\_\_

Primary Contact \_\_\_\_\_ Birthday \_\_\_\_\_ Alt. Phone \_\_\_\_\_

Email \_\_\_\_\_ Preferred Communication (*circle one*)    **Email**    **Fax**    **Mail**

Mailing Address (*if different from Physical Address*) \_\_\_\_\_

Title \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Other Contact \_\_\_\_\_

Email \_\_\_\_\_ Preferred Communication (*circle one*)    **Email**    **Fax**    **Mail**

Mailing Address (*if different from Physical Address*) \_\_\_\_\_

Title \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

*Please contact the Chamber if you would like to add more contacts to our mailing list.*

*(Please complete reverse side)*

**Questions?** *Please contact Melissa Ruvalcaba at, 815-433-0084. Go to, [www.ottawachamberillinois.com](http://www.ottawachamberillinois.com) for more info!  
Please send completed application **by mail**, Ottawa Area Chamber, 100 W. Lafayette, Ottawa, IL 61350; or **by fax**, 815-433-2405.*

**Office Use Only**      Board Approval Date \_\_\_\_\_ Membership Begins \_\_\_\_\_  
New Member Packet Sent \_\_\_\_\_ Entered in Database \_\_\_\_\_ Initials \_\_\_\_\_

