

MEMBERSHIP APPLICATION FORM

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Date _____
Referred by _____
Company _____

Business Category _____

Short Business Description _____

Eight (8) Keywords to describe your products/services for search engine optimization

Main Contact

Mr. Mrs. Ms. _____
Title _____
Direct Line () _____
Email _____

Other Company Representatives

Billing Contact

Name _____
Email _____

Marketing /Communications Contact

Name _____
Email _____

Human Resource Contact

Name _____
Email _____

Physical Address

Street _____
City /State/Zip _____
Phone () _____
Email _____
Website _____

Mailing Address (if different than physical address)

City / State/ Zip _____

Year business was established _____

Hours of Operation _____

Total # of Employees

Full time _____ Part time _____

Social Media

Your FaceBook _____

Your Twitter _____

Minority Owned Business

Woman Owned Business

Veteran Owned Business

12 Month Membership Investment Schedule

Business

1-50 employees	\$275.00
51-100 employees	\$500.00
100+ employees	\$750.00

Education & Government Agency	\$400.00
(additional school listing)	\$150.00

Non Profit (must have 501 c 3 letter) \$200.00

Utility \$750.00

Utility – any organization which provides services to the general public, although it may be privately owned. Public utilities include electric, gas, telephone, water and television cable systems.

Hospital	\$750.00
Individual	\$100.00

Individual memberships can't advertise business.

Banks/ Credit Unions	\$1,000.00
(additional branch listing)	\$150.00

Method of Payment

Check # _____ Cash \$ _____

Visa _____ Mastercard _____ Discover _____

(We do NOT accept American Express.)

Name on Card _____

Card Billing Address _____

Account Number _____

Exp. Date _____ V-Code _____

Signature _____