A close-up of a logo

Description automatically generatedMEMBERSHIP APPLICATION FORM

200 Northside Drive, Carrollton, Georgia 30117

Phone: 770-832-2446

[carrollchamber@carroll-ga.org](mailto:carrollchamber@carroll-ga.org) | carroll-ga.org

Date

Referred by

Company

Total # of Employees

Full time

Social Media

Part time

Business Category Short Business Description

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

Facebook

**12 Month Membership Investment Schedule**

* Individual $130.00

*Individual memberships cannot advertise business.*

* Business
* 1-50 employees $325.00
* 51-99 employees $575.00
* 100+ employees/Banks/

Credit Unions/Hospitals/Utilities $1000.00

* Education & Government Agency $450.00
* Non Profit (must have 501(c)3 letter $240.00

**Please note: Membership Dues Investment Schedule is subject to annual review and adjustment. Membership Dues are paid annually, and refunds for a partial year cannot be provided.**

Twitter

LinkedIn

* Minority Owned Business
* Woman Owned Business
* Veteran Owned Business

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

Method of Payment

Check \_\_Cash\_\_ Card # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

CCV - Visa \_MasterCard \_\_\_\_\_Discover\_\_\_\_\_

American Express (4 digits) \_\_\_\_\_\_\_\_

Name on Card

Card Billing Address

Account Number

Exp. Date

V-Code

Signature