



PORTLAND Regional Chamber

A Partnership of Community Chambers

FALMOUTH/CUMBERLAND * PORTLAND * SCARBOROUGH * SOUTH PORTLAND/CAPE ELIZABETH * WESTBROOK

MEMBERSHIP APPLICATION

Date _____

STEP ONE- MEMBERSHIP INFORMATION *(information will be listed on our website and published in the Membership Directory)*

Company Name _____

Number of Full time Employees _____ Number of Part- Time Employees _____

Street Address _____

City _____ State _____ Zip _____

Company Phone _____ Fax _____

Website URL _____ Company e-mail _____

Business Description(25 word limit) _____

Business Category (See attached List)

Primary _____ Secondary _____

STEP TWO- CONTACT INFORMATION *(Main Contact to be listed on our website and in our directory)*

Main Contact _____

Title _____ Email _____

Phone _____ Cell _____

Fax _____

Additional Contacts to receive Chamber print and electronic communications

Name _____

Title _____ E-mail _____

Name _____

Title _____ E-mail _____

OVER



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STEP THREE - MAILING AND BILLING ADDRESSES

Mailing Address _____

City _____ State _____ Zip _____

Billing Address(if different) _____

City _____ State _____ Zip _____

Billing Contact, if different from Main Contact _____

YOUR REASONS FOR JOINING THE CHAMBER? PLEASE CHECK ALL THAT APPLY

Chamber BlueOptions Health Plan

Events/Networking

Advocacy

Discounts

Advertising

Maine Business Expo Trade Show

Committee involvement

Other _____

DID ANYONE REFER YOU TO JOIN THE CHAMBER? _____

STEP FOUR - MEMBERSHIP INVESTMENT SCHEDULE

General Business (Dues based on number of employees)

Base of \$275 includes first two full time employees \$275

· Add \$11 for each additional employee up to 100 \$ _____

· Add \$5.50 for each additional part time employee up to 100 \$ _____

· Over 100 Full time employees , add \$5.25 per employee \$ _____

· Application Fee \$ 20 _____

Total \$ _____



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Professional Business (Attorneys, Accountants, Doctors, Architects, Engineers)

Dues are based on the number of professionals

- \$275 for first professional \$275
- \$42 per additional professional \$_____
- Application Fee \$20
- Total\$**_____

Hotels/Motels

- Base of \$275 \$275
- Add \$5.25 per room \$_____
- Application Fee \$20
- Total\$**_____

All Businesses located outside the greater Portland Region

- Base Rate \$275
- Application fee \$20
- Total\$**_____

Non -Profit Rate

- Base Rate \$275
- Application fee \$20
- Total\$**_____

Financial Institutions

Please call 207-772-2811 for investment schedule

Method of Payment

My first year's dues investment is \$_____ payable: Annually_____ *Semi-Annually_____ *Quarterly_____

** Quarterly and semiannually payment plans include a \$5 processing fee, per billing.*

Check Enclosed_____ Visa_____ American Express_____ Mastercard_____ Discover Card_____

Card#_____ Exp.Date_____ Sec. Code_____

Name as it appears on card_____

Dues are not tax deductible as charitable contributions, but may be deductible as a business expense.

Please return to: **Portland Regional Chamber, 60 Pearl Street, Portland, ME 04101-4163**

Phone: 207. 772.2811 Fax: 207.772.1179 www.portlandregion.com.

Office Use			
Join Date _____	Annual Dues _____	Payment _____	App Fee _____
Cycle _____	Business Type _____	DB _____	Wel Letter _____