



CLEVELAND-BOLIVAR COUNTY
CHAMBER

Business Name _____

Business Description _____

Primary Contact _____

Physical Address _____

Mailing Address _____

Phone _____

E-mail _____

Website _____

Annual Investment \$ _____

I, hereby apply for membership in the Cleveland Bolivar County
Chamber of Commerce

Signature _____ Date _____

Please list the name and email address of employees at your
business who you would like to add to the Chamber's mailing list:

NAME	E-mail
_____	_____
_____	_____
_____	_____

Business Membership

1st Person \$250

1-9 emp. add \$15 ea

10+ emp. add \$10ea

Investment

\$250____

\$15 ea ____

\$10 ea ____

Financial Institutions

\$30 per million dollars of deposits

(\$450 min./\$2,500 max.)

Hotels/Motels

Base Member

\$250____

per room

\$2.50____

Mfg./Distribution/Agriculture

1st Person

\$250____

1-9 emp. add

\$15____

10-20 emp. add

\$5____

21-50 emp. add

\$2.50____

51+ emp. add

\$1.25____

Professional Services

Each Partner

\$250____

1-9 staff mbr.

\$15____

10+ staff mbr.

\$10____

Utility

Base

\$300____

Per svc. mbr

\$.05____

Individual (non-business owner)/Spouse

1st Person

\$100____

Spouse

\$25____

DSU Students

\$25____

Retiree 1st Person

\$70____

Retiree Spouse

\$15____

Chamber Membership includes membership
in Team Cleveland (Cleveland Main Street)