

5503 Muddy Creek Road  
410-867-3129



Churchton, MD 20733  
chamber@southcounty.org

Celebrating 25 Years

**2018 MEMBERSHIP APPLICATION:**

**Directory Information:** *(To be used in the 2018 Directory and Website Directory)*

*(PLEASE PRINT)*

Membership Mo/Year: \_\_\_\_/\_\_\_\_

Business Name or Organization:			
Business Owner(s):			
Address (Physical Location):			
Business Phone:		Fax:	
E-mail:			
Website Link Address:			
Category Listing for Business Directory	1) _____	(free)	
<i>(Additional Category Listings \$55 each):</i>	2) _____		
	3) _____		

**Additional Information:** *(Office use only)*

Mailing Address <i>(If Different)</i> :			
Additional Contact Name:		Alternate Phone Number:	
Description of Business or Services: <i>To gain additional exposure, consider using keywords as categories to enhance your listing in the directory</i>			
How Did You Hear About Us: __Directory__ __Web__ __Facebook__ __Other__ __Member__			
Number of Employees		Number of Years in Business	<input type="checkbox"/> New Member <input type="checkbox"/> Renewal Member
<input type="checkbox"/> LinkedIn	Twitter@_____		Facebook:_____

PLEASE REVIEW AND SELECT YOUR ANNUAL MEMBERSHIP OR CORPORATE PARTNERSHIP INVESTMENT ON THE BACK OF THIS APPLICATION  
(Membership is annual expiring on December 31, 2018)

*Please contact the Chamber office for more information regarding your investment and other advertisement opportunities!*

*Thank You for investing in your business and supporting the Southern Anne Arundel Chamber of Commerce!*

For Office Use Only:	<input type="checkbox"/> Quickbooks	<input type="checkbox"/> Assign Ambassador	<input type="checkbox"/> Welcome Letter	<input type="checkbox"/> Constant Contact	DATE APPLICATION RECEIVED: _____
	<input type="checkbox"/> Contact Ambassador	<input type="checkbox"/> Outlook Database	<input type="checkbox"/> Website Listings	<input type="checkbox"/> Directory Listings	Paid Check /Credit Card: _____
					Amount: _____ Date: _____

Please Note that Membership Rates are Subject to Change. Contact the Chamber before Submitting your Membership Application

**CHECK ONE OF THE FOLLOWING MEMBERSHIP OR CORPORATE PARTNERSHIP INVESTMENTS.**

**SAACC Annual Membership Investment**

(Membership is annual expiring on December 31, 2018)

- \_\_\_\_\_ \*\$80.00 – Associate Member/Individual (Individuals not associated with a business)
- \_\_\_\_\_ \$100.00 – Non-Profit (501 (c)3 - Organizations with 1 Representative)
- \_\_\_\_\_ \$200.00 – Business (1-5 Employees – 1 Representative)
- \_\_\_\_\_ \$275.00 – Business (6-50 Employees – 2 Representatives)
- \_\_\_\_\_ \$325.00 – Business (51-100 Employees – 3 Representatives)
- \_\_\_\_\_ \$375.00 – Business (101-150 Employees – 4 Representatives)
- \_\_\_\_\_ \$425.00 – Business (151+ Employees – 5 Representatives)

***\*Associate Members are entitled to all of the SAACC membership benefits, but are not eligible to vote or serve on the Board.***

Representative Name  
(For voting purposes)

\_\_\_\_\_

**SAACC Corporate Partnership Investment:**

- \_\_\_\_\_ \$5,000.00 – SO CO EXECUTIVES CLUB
- \_\_\_\_\_ \$2,500.00 – THE SO CO CLUB
- \_\_\_\_\_ \$1,500.00 – PRESIDENTS CLUB
- \_\_\_\_\_ \$1,000.00 – CHAIRMANS CLUB
- \_\_\_\_\_ \$ 500.00 – MEMBERS CLUB

Membership Investment	\$
Additional Category Listings \$55 x _____	\$
Corporate Partnership Investment	\$
Total paid with this application	\$

**Check Type of Payment:**

Check  Visa  MasterCard  Discover  American Express

Name on Card: \_\_\_\_\_

Card Number: \_\_\_\_\_

Expiration Date: \_\_\_\_\_

Billing Address \_\_\_\_\_

CSV Code \_\_\_\_\_

\_\_\_\_\_

Signature \_\_\_\_\_

Applicant's Signature

Date

*Membership Dues may be Deductible as Ordinary and Necessary Business Expenses.  
Not Tax Deductible as Charitable Contributions for Federal Income Tax Purposes.*

**Mail Your Application with Full Payment to:**

SAACC, ATTN: Membership, 5503 Muddy Creek Road, Churchton, MD 20733