



**5503 Muddy Creek Road**  
**410-867-3129**

**Churchton, MD 20733**  
**chamber@southcounty.org**

**2022 MEMBERSHIP APPLICATION:**

**Directory Information: (To be used for the Website Directory)**

*(PLEASE PRINT)*

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

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

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

<b>Mailing Address (If Different):</b>			
<b>Additional Contact Name:</b>			<b>Alternate Phone Number:</b>

<b>Description of Business or Services:</b>	<i>To gain additional exposure, consider using <b>keywords</b> as categories to enhance your listing in the <b>directory online</b>:</i>		
	_____		
	_____		

**How Did You Hear About Us:**  Directory  Web  Facebook  Other  Member \_\_\_\_\_

<b>Number of Employees</b>		<b>Date/Year Business Established</b>		<input type="checkbox"/> <b>New Member</b>	<input type="checkbox"/> <b>Renewal Member</b>
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<input type="checkbox"/> <b>LinkedIn</b>	<b>Twitter@</b> _____	<b>Facebook:</b> _____
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*Please Note: Membership Rates are Subject to Change, please contact the Chamber before Submitting your Membership Application. Memberships are accepted year-round!*

**Check ONE of the following Annual Membership options:**

- \$100.00 – Non-Profit (501 (c)3 - Organizations with 1 Voting Representative)
- \$225.00 – Basic Chamber Member Package
- \$300.00 – Membership Plus Online Package
- \$375.00 – Basic Networking Package
- \$500.00 – Prime Networking Package
- \$1,500.00 – Elite Networking Package

Company Representatives Names (Will be added to email communication regarding Events)	
Name:	<input type="checkbox"/> General Membership <input type="checkbox"/> Young Professional <input type="checkbox"/> SoCo Women's Group
Email:	<input type="checkbox"/> Legislative Committee <input type="checkbox"/> Event Committee <input type="checkbox"/> Membership Ambassador
Name:	<input type="checkbox"/> General Membership <input type="checkbox"/> Young Professional <input type="checkbox"/> SoCo Women's Group
Email:	<input type="checkbox"/> Legislative Committee <input type="checkbox"/> Event Committee <input type="checkbox"/> Membership Ambassador
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Email:	<input type="checkbox"/> Legislative Committee <input type="checkbox"/> Event Committee <input type="checkbox"/> Membership Ambassador
Name:	<input type="checkbox"/> General Membership <input type="checkbox"/> Young Professional <input type="checkbox"/> SoCo Women's Group
Email:	<input type="checkbox"/> Legislative Committee <input type="checkbox"/> Event Committee <input type="checkbox"/> Membership Ambassador

**The directory will not be mailed to all zip codes but will be distributed in the Southern Anne Arundel Community as well as through chamber and public events.**

**Request Additional Copies of the Directory to use in the office to distribute to customers or use at events:  10  25  50  100  250  500**

Membership Option (from page 1)	\$
Additional Category Listings \$55 x _____	\$
<b>Total paid with this application</b>	<b>\$</b>

**Check Type of Payment:**  Check  Visa  MasterCard  Discover  American Express

Name on Card: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Card Number: \_\_\_\_\_ CSV Code \_\_\_\_\_

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

Cardholder 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  
**Email: Chamber@SouthCounty.org**

**For Office Use Only:**

- |   |  |   |   |
|---|--|---|---|
| <input type="checkbox"/> Quickbooks       | <input type="checkbox"/> Assign Ambassador | <input type="checkbox"/> Welcome Letter   | <input type="checkbox"/> Constant Contact   |
| <input type="checkbox"/> Facebook Welcome | <input type="checkbox"/> Company Spotlight | <input type="checkbox"/> Website Listings | <input type="checkbox"/> Directory Listings |

DATE APPLICATION RECEIVED: \_\_\_\_\_

Paid Check /Credit Card: \_\_\_\_\_

Amount: \_\_\_\_\_ Date: \_\_\_\_\_