

MEMBERSHIP APPLICATION



Who can we thank for referring you to the Chamber? _____

Business Name (as you'd like it to appear on our directory): _____ Date Company Started: _____

Business General Email (the email that will be listed on our website): _____

Physical Address: _____

City & State: _____ Zip Code: _____

Mailing Address (if different): _____

Phone: _____ Fax: _____ Number of Full-Time Employees: _____

Number of Part-Time Employees: _____ Women Owned? _____ Minority Owned? _____ Veteran Owned? _____

Website: _____ Twitter: _____ Facebook: _____

Other Social Media: _____ 10 Search Words Relating to your Business for our Online Directory: _____

Business Owner/CEO Contact:

Name: _____ Title: _____ Email: _____

Primary Contact (if different than owner/CEO):

Name: _____ Title: _____ Email: _____

Secondary Contact:

Name: _____ Title: _____ Email: _____

2018 MEMBERSHIP INVESTMENT SCHEDULE

A one-time \$50 administration fee is due upon joining.

GENERAL CATEGORIES:

If your business does not fall into one of the specific categories to the right, the investment formula is based on your full-time equivalent number of employees. (FTE formula = # total weekly hours worked by all employees divided by 40)

NUMBER OF EMPLOYEES:

- 1 – 3 Employees: \$351
- 4 – 100 Employees: \$351 + \$12.62 per employee > 3
- 101 – 200 Employees: \$1611 + \$6.17 per employee > 100
- 201 – 500 Employees: \$2871 + \$3.10 per employee > 200
- Over 500 Employees: \$3728 + \$1.51 per employee > 500

SPECIFIC CATEGORIES:

- **Professionals**
\$351 + \$117 per additional partner or licensed personnel
- **Realtors**
\$351 + \$117 per partner + \$36.44 per additional Realtor
- **Attorneys**
\$351 + \$117 per additional partner/principal or licensed personnel
- **Financial Institutions**
\$351 + \$23.30 per million in deposits
- **Grocery Stores**
\$351 + \$1.58 per hundred square feet
- **Hotel / Motel**
With banquet facilities: \$351 + \$6.28 per room
Without banquet facilities: \$351 + \$3.13 per room
- **Insurance or Investments**
\$351 + \$117 per additional partner or licensed agent
- **Non-profit**
\$351
- **Retiree/Student/Recent Graduate**
\$75
- **Individual**
\$150 (for individuals not working for a commercial business)
- **Additional Business Locations**
\$129 + \$12.62 per employee
Fax completed application to 319-338-9958, or email info@iowacityarea.com.

Credit Card Payment Information	
Payment Options: _____ Cash _____ Check Charge: _____ Visa _____ Master Card _____ American Express Card Number _____ Card Holder _____ Expiration Date _____ Sec. Code _____ Billing Zip Code: _____	Dues Billed: _____ Admin. Fee: _____ \$50 _____ TOTAL: _____