

# The Franklin Area Chamber of Commerce Application: Basic\*\*\*

P.O. Box 721, Franklin, OH 45005 | 1200 E. 2nd St., Ste B, Franklin, OH 45005 | (937) 746-8457 | chamber45005.org |chamber45005@gmail.com

## MEMBER INFORMATION:

Organization Name \_\_\_\_\_  
 Main Contact Name \_\_\_\_\_  
 Title \_\_\_\_\_  
 Mailing Address \_\_\_\_\_  
 City, State and Zip \_\_\_\_\_  
 Phone (      ) \_\_\_\_\_  
 E-mail \_\_\_\_\_  
 Website \_\_\_\_\_  
 Facebook page \_\_\_\_\_  
 # of employees full -time \_\_\_\_\_ part time \_\_\_\_\_  
 Date organization established \_\_\_\_\_  
 Alternate Contacts \_\_\_\_\_  
 HR/CEO/Top Exec \_\_\_\_\_

## BUSINESS CATEGORY (for our website). Choose one only.

- |   |  |
|---|--|
| <input type="checkbox"/> Automotive                   | <input type="checkbox"/> Community Organization    |
| <input type="checkbox"/> Construction/Engineering     | <input type="checkbox"/> Education/Government      |
| <input type="checkbox"/> Entertainment/Arts/Culture   | <input type="checkbox"/> Finance/Banking/Insurance |
| <input type="checkbox"/> Fleet Repair                 | <input type="checkbox"/> Healthcare                |
| <input type="checkbox"/> Lodging/Travel               | <input type="checkbox"/> Manufacturing             |
| <input type="checkbox"/> Media                        | <input type="checkbox"/> Non-profit                |
| <input type="checkbox"/> Pets                         | <input type="checkbox"/> Public Utilities          |
| <input type="checkbox"/> Professional                 | <input type="checkbox"/> Real Estate               |
| <input type="checkbox"/> Recreation                   | <input type="checkbox"/> Retail/shopping/wholesale |
| <input type="checkbox"/> Restaurants/Catering         | <input type="checkbox"/> Services                  |
| <input type="checkbox"/> Tax prep/payroll/bookkeeping | <input type="checkbox"/> Technology                |
| <input type="checkbox"/> Transportation/Logistics     | <input type="checkbox"/> Other                     |

Please provide more detail: \_\_\_\_\_  
 \_\_\_\_\_

## BENEFITS:

*I would like to receive information about:*

- SOCA Insurance Plans
- Infintech Merchant Services
- Office Depot discount
- Workers' Comp Group plans
- Superior Dental Care savings
- Rx discount card\*
- Warren County Safety Council
- Ohio Means Jobs (Warren County) Seminar discounts \*
- Shred-it Document Management/Shredding
- Trak-1 Employment Background Screening Discounts
- Bannockburn Global Forex LLC Foreign Currency Exchange Services

\*These benefits included in membership at no additional cost.

## FOR-PROFIT:

### BASIC\*\*\* MEMBERSHIP

# Employees	Investment
1-5 .....	\$115
6- 12 .....	\$135
13-25 .....	\$145
26-50 .....	\$175
51-100 .....	\$230
101-200 .....	\$345
201-300 .....	\$460
301+ .....	\$600***

## GOVERNMENT/PUBLIC EDUCATION:

50% discount from published rate based on # of **full-time** employees; \$115 minimum: \_\_\_\_\_

## NON-PROFIT (charitable): \$95

## INDIVIDUAL/NON-VOTING:

Associate.....\$45\*\*  
 Senior .....\$40\*\*  
 Family .....\$50\*\*

\*\*Not listed on web site

**TOTAL** ..... \_\_\_\_\_

## PAYMENT OPTIONS:

Cash       Check

**Credit/Debit Card (Visa, MC, Disc.)**

Please call the Chamber office to pay by credit card. (937) 746-8457.

**REFERRALS:** I know another organization/individual that can benefit from the Chamber: \_\_\_\_\_  
 \_\_\_\_\_

## Office use only:

- |   |   |
|---|---|
| <input type="checkbox"/> Email            | <input type="checkbox"/> Mailing list   |
| <input type="checkbox"/> Constant Contact | <input type="checkbox"/> Member list    |
| <input type="checkbox"/> Website          | <input type="checkbox"/> Benefits visit |
| <input type="checkbox"/> Benefits sheet   |   |

Dues received: \_\_\_\_\_

Membership in the Franklin Area Chamber of Commerce constitutes express permission for the Chamber to transmit by e-mail or writing, materials including but not limited to those relating to goods, services, meetings or notices thereof. The signature below indicates understanding of the above and request for membership.

Signature \_\_\_\_\_

\*\*\*Please contact the office for Sustaining Member benefits. Form revised January 26, 2017.