



Membership Application and Renewal Form

I hereby make application for membership in the San Marino Chamber of Commerce and agree to uphold the By-Laws of the Chamber. I understand that this membership and fee is valid for one year, and annual dues are payable in January at the start of each new year. **Any member whose dues is in arrears for 4 months or longer will be dropped from the membership and will be charged a reinstatement fee of \$50 along with the past due amount owed.

Company Name _____ Date _____
 Address _____
 City/State/Zip _____
 Phone Number _____ Fax Number _____
 Email Address _____ Website _____
 Contact Person _____ Signature _____
 Nature of Business _____ # of Employees _____

Membership Classification (please check category which is applicable to your business)
 (Count part time employees as 2 for 1)

_____	1-4 Employees	\$95/year	_____	Retail
_____	5-10 Employees	\$125/year	_____	Professional
_____	11-15 Employees	\$160/year	_____	Service
_____	16-24 Employees	\$190/year	_____	Medical
_____	25 Employees	\$295/year	_____	Restaurant
_____	Utilities/Banks/Financial Institutions	\$295/year	_____	Real Estate
_____	Home Based/Internet Business	\$95/ year		
_____	Community/Non-Profit Organization	\$80/year		
_____	Residential	\$80/year		
_____	New Member Processing Fee	\$20 (one time fee only)		

\$ _____ Yearly Membership Dues

20.00 New Member Processing Fee (Void for Renewal of existing Membership)

\$ _____ Total Amount Due (Make checks payable to San Marino Chamber of Commerce
 And mail to: 1800 Huntington Drive, San Marino, CA 91108)

Membership Expectations: Please write a short summary of what you expect from the Chamber during your year of membership _____

I would be interested in serving on one of the following Committees (check where applicable)

Membership
 Christmas Around the Drive
 Mixers/Special Events
 Evening at the Huntington
 Police & Fire Luncheon
 Milestone Breakfast