

GCC Membership Application/Renewal Form _____ New Member _____ Renewal Date: ____/____/____

Business Name _____

Representative _____

Resident Name _____

Address _____

Phone # _____ Fax # _____

Email _____ Website _____

Referred by? _____

Check the appropriate category:

_____ 1-3 Employees \$100.00

_____ 4-10 Employees \$150.00

_____ 11-25 Employees \$195.00

_____ 26-50 Employees \$250.00

_____ 51+ Employees \$290.00

_____ Non-Profit Org./Assoc. \$75.00

_____ Resident \$50.00

Would you be interested in hosting a GCC Networking Social? _____

Would you be interested in offering a "perk" to our members? _____

Would you be interested in a ribbon cutting ceremony? _____

Please mail application & payment to: Greendale Chamber of Commerce
P.O. Box 467
Greendale, WI 53129
(414) 409-2556

Visit greendalechamber.com

Total Amount Enclosed: _____

***The GCC reserves the right to deny membership to those who do not represent their organization appropriately. One of our board members will be reaching out to you once your application has been received and approved.**