

**MEMBERSHIP APPLICATION**

\*Business Name \_\_\_\_\_ \*Year Established \_\_\_\_\_

\*Street Address \_\_\_\_\_ \*City \_\_\_\_\_ \*State \_\_\_\_\_ \*Zip \_\_\_\_\_

\*Mailing Address \_\_\_\_\_ \*City \_\_\_\_\_ \*State \_\_\_\_\_ \*Zip \_\_\_\_\_

\*Telephone \_\_\_\_\_ \*Fax \_\_\_\_\_

\*Web Address \_\_\_\_\_

Company E-mail (for online directory) \_\_\_\_\_

Parent Company (if applicable) \_\_\_\_\_

Total Number of Employees \_\_\_\_\_ \*Full-time \_\_\_\_\_ \*Part-time \_\_\_\_\_ \*Professional \_\_\_\_\_

\*Primary Contact \_\_\_\_\_ Title \_\_\_\_\_

\*Primary Contact Phone \_\_\_\_\_ Email \_\_\_\_\_

Billing Contact \_\_\_\_\_ Email \_\_\_\_\_

Phone \_\_\_\_\_ Alternate Address \_\_\_\_\_

Company CEO \_\_\_\_\_ Phone \_\_\_\_\_ Email \_\_\_\_\_

HR Manager \_\_\_\_\_ Phone \_\_\_\_\_ Email \_\_\_\_\_

Sales Manager \_\_\_\_\_ Phone \_\_\_\_\_ Email \_\_\_\_\_

Brief description of business / keywords \_\_\_\_\_

**Business Classification** \*\*This category will be used for your listing in the annual Membership Directory, mobile app and on www.tulsachamber.com.

Under what category is your business listed in the Yellow Pages?(List one) \_\_\_\_\_

Please list other categories (up to five) for online member directory listing \_\_\_\_\_

\_\_\_\_\_

Minority owned \_\_\_\_\_ Woman owned \_\_\_\_\_ Veteran owned \_\_\_\_\_ Native American \_\_\_\_\_ Hispanic \_\_\_\_\_

**Reasons for joining the Chamber**

<input type="checkbox"/> Networking	<input type="checkbox"/> Civic Responsibility
<input type="checkbox"/> Government Advocacy	<input type="checkbox"/> Support VisitTulsa
<input type="checkbox"/> Economic Development	<input type="checkbox"/> Education
<input type="checkbox"/> Chamber Choice Insurance	<input type="checkbox"/> Community Betterment
<input type="checkbox"/> Access to Hoover Database	<input type="checkbox"/> Tulsa's Young Professionals
<input type="checkbox"/> Sponsorship Opportunities	<input type="checkbox"/> Small Business Programs
<input type="checkbox"/> Tulsa Sports Commission	<input type="checkbox"/> Other

**Dues and payment information**

Annual Dues		<input type="checkbox"/> Check
		<input type="checkbox"/> Visa
		<input type="checkbox"/> Master Card
Expiration	Sec. Code	<input type="checkbox"/> Discover
		<input type="checkbox"/> American Express
Check or Credit Card Number		

I agree that to the best of my knowledge all information provided on this Membership Application is correct and true, as of this date:

Authorized Signature \_\_\_\_\_ Date \_\_\_\_\_

**Volunteer Representative**

**For office use only**

Kian Kamas	NAICS Code	<input type="checkbox"/> Business Builder	<input type="checkbox"/> Business Investor
		<input type="checkbox"/> Community Builder	<input type="checkbox"/> Community Investor