



# GUSTINE CHAMBER OF COMMERCE ANNUAL DUES STATEMENT

375 5TH St. OR PO Box 306, Gustine, CA. 95322 ~ [gustinechamber@att.net](mailto:gustinechamber@att.net) ~ 209-854-6975

[www.gustinechamberofcommerce.com](http://www.gustinechamberofcommerce.com)

BUSINESS NAME: \_\_\_\_\_

CONTACT NAME: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

LOCATION ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

BUSINESS PHONE: (\_\_\_\_) \_\_\_\_ - \_\_\_\_ CONTACT PHONE: (\_\_\_\_) \_\_\_\_ - \_\_\_\_ FAX: (\_\_\_\_) \_\_\_\_ - \_\_\_\_

E-MAIL ADDRESS: \_\_\_\_\_ Is this e-mail ok to release to the public? \_\_\_\_\_

PLEASE PROVIDE A BRIEF DESCRIPTION OF YOUR BUSINESS: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

NEW PLAQUE: ☐ DATE STAMP: ☐

## Business Member - Based on number of employees

Sole Proprietor, No Business Location.....\$60.00

1-25 Employees Business Location.....\$70.00

26-100 Employees.....\$110.00

101+ Employees .....\$160.00

All owners, partners, managers, commissioned sales people and  
licensed associates are considered employees.

## Residential Associate Member

Includes, educators, clergy, elected officials, government employees,  
retired, and other individuals not associated with a business.

.....\$30.00

## Non-Profit Associate Member

Includes, all non-profit groups or clubs.

.....\$30.00

## Credit Card Payment

Name on Card: \_\_\_\_\_

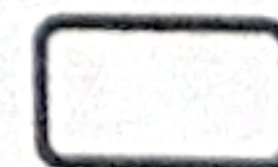
Address (if different than above): \_\_\_\_\_

City, State, Zip Code: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Card Number: \_\_\_\_\_ Exp: \_\_\_\_ / \_\_\_\_

3 Digit Code: \_\_\_\_ Signature x \_\_\_\_\_



## **Please Mail Payment & Application to:**

Gustine Chamber of Commerce  
PO Box 306  
Gustine, CA. 95322

## **Drop Off Location:**

375 5th St. Gustine, CA. 95322

**FOR OFFICE USE ONLY:** APPLICATION DATE: \_\_\_\_\_ PAYMENT TYPE: \_\_\_\_\_

MAILER: ☐ WEBPAGE: ☐ E-BLAST: ☐ UPDATE: ☐ BUSINESS CARDS: ☐