



Rocklin Area Chamber of Commerce

3700 Rocklin Road • Rocklin, CA 95677

(916) 624-2548 • Fax: (916) 624-5743

www.rocklinchamber.com • E-Mail: info@rocklinchamber.com

MEMBERSHIP APPLICATION

(Please Print)

Date: _____ Company Name: _____

Street Address: _____ City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____ Website: _____

Mailing Address: _____ City: _____ State: _____ Zip: _____

Representative Name: _____ Title: _____

Email: _____ Contact Phone #: _____

Billing Contact: _____ Billing Phone #: _____

Type of Business

Wholesale / Retail Service Professional

Category: _____

How did you learn about becoming a member of the Rocklin Chamber?

Sales Call/ Person Ambassador Letter / Mailing

Newspaper Friend / Referral

Other: _____

What is your main goal in belonging to the Rocklin Chamber of Commerce? _____

DISCLAIMER: "I hereby grant the Rocklin Chamber of Commerce the right to take photographs and display them, whether known by me or not, in their marketing and media coverage of events and /or monthly publications."

SIGNATURE: _____ DATE: _____

MEMBERSHIP INVESTMENT

# Of Employees	Annual Dues	Non-Profit Price
1-5	\$225	\$135
6-10	\$275	\$135
11-15	\$325	\$150
16-25	\$375	\$175
26-50	\$525	\$250
51-75	\$650	\$325
76-100	\$750	\$375
101-200	\$900	\$450
201-300	\$1100	\$550
301+	\$1200	\$600
Government	\$1500	
Hotels/Mobile Homes	\$235 + \$1 per unit	

Chamber Membership Investment: \$ _____

Initiation Fee (1st Year Only): \$ _____

Total Paid : \$ _____

Payment Options:

Check Cash Visa / MC American Express

_____ Exp _____

Membership is non-refundable. The Board of Directors has the right to accept or reject any application for membership.

*Full Time Employees or equivalent of 40hrs per week.

Example: Two 20 hr/wk employees = 1employee