MID-ATLANTIC HISPANIC CHAMBER OF COMMERCE (MAHCC.ORG)

2009 MEMBERSHIP APPLICATION (JANUARY 1-DECEMBER 31)

NAME OF APPLICANT: _____
(LAST) (FIRST) (MIDDLE)

TITLE/POSITION: _____

NAME OF ORGANIZATION: _____

ADDRESS: _____
(STREET)

_____
(CITY) (COUNTY) (STATE) (ZIP CODE)

PHONE: _____ **FAX:** _____ **MOBILE:** _____

WEBSITE (URL): _____ **EMAIL:** _____

TYPE OF BUSINESS:

- ❑ RETAIL
- ❑ RESTAURANT & HOSPITALITY INDUSTRY
- ❑ BANKING, FINANCIAL SERVICES, INSURANCE, REALTY
- ❑ GOVERNMENT CONTRACTORS
- ❑ PROFESSIONAL (PHYSICIAN, ATTORNEY, ACCOUNTANT, ETC.)
- ❑ TRANSPORTATION
- ❑ EDUCATIONAL INSTITUTION
- ❑ NON-PROFIT ORGANIZATION
- ❑ GOVERNMENT AGENCY
- ❑ CONSULTANT SERVICES
- ❑ MAINTENANCE SERVICES (AUTO, JANITORIAL, ETC.)
- ❑ HIGH TECH: IT, BIOTECH, TELECOM, ETC.
- ❑ CONSTRUCTION/REMODELING
- ❑ OTHER:

MEMBERSHIP DUES:

- ❑ NON-PROFIT $250

SMALL BUSINESS:

- ❑ 1-9 EMPLOYEES $200
- ❑ 10-19 EMPLOYEES $300
- ❑ 20-50 EMPLOYEES $500

CORPORATE MEMBERSHIP:

- ❑ CORPORATE BRONZE $1,500
- ❑ CORPORATE SILVER $2,500
- ❑ CORPORATE GOLD $4,000
- ❑ CORPORATE DIAMOND $6,000
- ❑ CORPORATE PLATINUM $10,000+

PLEASE PAY WITH CHECK OR MONEY ORDER PAYABLE TO MAHCC AND MAIL IT TO:

MAHCC
P.O. BOX 910
GERMANTOWN, MD 20875-0910

PAY WITH CREDIT CARD (VISA, MASTER CARD, AMERICAN EXPRESS):

CARD NUMBER:_____

EXPIRATION DATE:_____

NAME OF CARDHOLDER:_____

MAHCC is a non-profit organization established under Section 501(c) 6 of the IRS Code – EIN No.: 26-2203489

APPLICANT'S SIGNATURE: _____ **DATE:** _____

FOR OFFICE USE ONLY:

REVIEWED BY: _____ **DATE:** _____ ❑ **APPROVED** ❑ **DENIED**

Thank you for your support!

ALL RIGHTS RESERVED, MID-ATLANTIC HISPANIC CHAMBER OF COMMERCE, INC. (WWW.MAHCC.ORG) – LAST REVISION: 02-04-09