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OFFICE USE ONLY
 Status: _____
 Dated: _____
 Member # _____

MEMBERSHIP APPLICATION

PLEASE PRINT

To the President and Board of Directors:

I hereby make application for membership with the Guelph Chamber of Commerce. I agree to maintain my membership until resignation in writing has been accepted by the Directors as provided in the by-laws.

Company Name: _____ Date: _____

"Doing Business As" Name: _____
 (If different from Legal Company Name)

Name of person completing application: _____ Signature: _____

THE FOLLOWING INFORMATION ALLOWS THE CHAMBER TO PROMOTE YOUR BUSINESS. PLEASE FILL OUT AS COMPLETELY AS POSSIBLE.

Physical Address: _____ Unit / Suite #: _____

City: _____ Postal Code: _____

Mailing Address: _____ Unit / Suite #: _____
 (if different from above) (Street Address)

City: _____ Postal Code: _____
 (if different from above)

If this is a home-based business, do you want your address printed in the Membership Directory or shown on the online directory? Yes No

Company Telephone: _____ Toll Free: _____

Company Fax: _____ Don't Fax Daytime Only Anytime

Company Email: _____ Website (URL): www. _____

Facebook: _____ Twitter: _____ LinkedIn: _____

Number of employees:

Full time: _____ Part time: _____ Total _____ FTE employees (Full Time Equivalent) _____ (Mandatory)

Our organization is

Nonprofit: Yes No **If YES, are the staff:** Paid OR Unpaid

Our organization is a member of the Centre Wellington Chamber of Commerce (Fergus/Elora): Yes No

Our organization is a member of the Guelph Business Enterprise Centre: Yes No

Is your company ISO registered? Yes No

If YES, please indicate ISO registration number: _____

BUSINESS SECTOR

Please indicate the type of business:

Corporation Limited Partnership Sole Proprietor

Please select one Business Sector that best reflects your Industry:

Service Manufacturing Public Retail

Month & year company established: _____ (mm/yyyy) Does your company Export? Yes No

Building Square Feet (if applicable): _____

How did you hear about the Guelph Chamber of Commerce Membership?

- | | | |
|---|---|--|
| <input type="checkbox"/> GCC Brochure | <input type="checkbox"/> E-mail Broadcast | <input type="checkbox"/> GCC Special Offer |
| <input type="checkbox"/> Colleague | <input type="checkbox"/> Newspaper | <input type="checkbox"/> Another Chamber |
| <input type="checkbox"/> Previously a Chamber Member | <input type="checkbox"/> GCC Staff Referral | <input type="checkbox"/> GWBEC |
| <input type="checkbox"/> Moving Business Forward Magazine | <input type="checkbox"/> Radio | <input type="checkbox"/> Website |
| <input type="checkbox"/> Member of the Chamber | _____ (company name) | |

PRODUCTS / SERVICES

Write in the one main category which best describes your business:

(This is the category that is used for your free Buyers Guide listing and the online directory.)

CONTACT INFORMATION

Please provide information for as many representatives as are applicable for your company. While all local staff have full access to Chamber programs, assigned contacts/representatives may carry voting rights and receive chamber communications, mailings and ballots.

MAIN CONTACT

Name: Mr. Dr. Ms Mrs. _____

Title: _____

Telephone: _____ Cell: _____

Email: _____

Contact by: Email Phone Letter (circle one) Add to the chamber email list. Yes No

Designate in Business Directory: Yes No

Designate as official company representative (with voting rights): Yes No

MAIN DUES CONTACT (if different from above)

Name: Mr. Dr. Ms Mrs. _____

Title: _____

Telephone: _____ Cell: _____

Email: _____

ADDITIONAL CONTACT

Name: Mr. Dr. Ms Mrs. _____

Title: _____

Telephone: _____ Cell: _____

Email: _____

Contact by: Email Phone Letter (circle one) Add to the chamber email list. Yes NoDesignate in Business Directory: Yes NoDesignate as official company representative (with voting rights): Yes No**PRODUCT / SERVICE INFORMATION**

Please provide a brief description of the product(s) and/or service(s) you provide (maximum 25 words) for use in the Annual Business Directory. A more detailed description may be added to the online directory after membership is activated. The words in the listing are used by the online search engine plus you may add logo, photos, social media sites and key search words.

REASON FOR JOINING THE CHAMBER

Please let us know the primary reason why your organization is joining the Guelph Chamber of Commerce:

PAYMENT OPTIONS

The Guelph Chamber of Commerce offers three payment options for your membership. Please indicate your preference. A Chamber representative will contact you when your application has been processed.

- Annual membership, payment in full
- Annual membership, monthly electronic payment (require PAP forms, void cheque and first monthly payment)
- Annual membership, monthly credit card payment plan (require PAP forms)

Method of Payment: Visa MasterCard Cheque Cash Please Invoice

Credit Card # _____ Expiry _____ / _____ CVD # _____

Cardholder Name _____

ELECTRONIC COMMUNICATIONS - Anti-Spam Legislation

It is important that the Guelph Chamber of Commerce is able to keep in touch with the community.

In order for you to receive our electronic communications, which include our publications, newsletters, updates, announcements, event or seminar invitations, or other information of interest ("Electronic Communications"), we need you to "Opt In" giving your express consent:

- Opt In** - I give express consent for the Guelph Chamber of Commerce to send me electronic communications
- Opt Out** - I do not give express consent for the Guelph Chamber of Commerce to send me electronic communications

Privacy. The information provided in this application is not information which is considered "personal information" under the Personal Information Protection and Electronic Documents Act of Canada. Notwithstanding, we wish to advise that the information provided may be posted on our website, members' directory, or any other similar membership listing we may publish in order to assist members and non-members to contact your business. We also sell to members and non-members, a list of our members, which includes the name of your business, mailing address and the name of your main contact person. Should you have any concerns or questions regarding your privacy, please contact the President & CEO of the Guelph Chamber at 822-8081.