

# Cushing Chamber of Commerce and Industry Prospect Member Investment Card

Date of Contact: \_\_\_\_\_  
 Team Captain: \_\_\_\_\_  
 Team Member: \_\_\_\_\_  
 Comments: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**Business:**

Owner/manager with up to 4 employees ..... \$200.00  
 Owner/manager with 5-10 employees ..... \$255.00  
 Owner/manager with over 10 employees ..... \$255.00 + \$5.00 per employee over 10

**Professional:**

*Includes physicians, accountants, attorneys, realtors, insurance agents, financial planners and other professionals. Each professional within the organization is encouraged to hold Chamber membership.*

Professional with up to 4 employees ..... \$200.00  
 Professional with 5-10 employees ..... \$255.00  
 Professional with over 10 employees ..... \$255.00 + \$5.00 per employee over 10  
 Each additional Professional ..... \$125.00

**Service Industry**

*Includes the School System, Hospital and Prison, Individual department directors and managers may hold Chamber membership under the umbrella of the organization's membership for \$50.00 per year.*

Organization ..... \$500.  
 +\$5.00 per employee over 10

**Financial Institutions:**

*Each financial institution and its local branches will hold Chamber membership. Bank officers are professionals for purposes of the investment schedule and will be listed members. Non-professional employees may hold Chamber membership under the institution's umbrella for \$55.00 per year.*

Institution ..... \$250.00 + \$35 per million in deposits  
 Professional ..... \$125.00

**Non-Profit Organizations:**

*Includes churches, Civic Clubs and other non-profit organizations.*

Organization ..... \$110.00

**Friends of the Chamber:**

*We encourage civic-minded individuals to become members of the Cushing Chamber of Commerce. This category represents Retirees, Educators, Clergy, Military, Non-professional Employees of a Business Member and Individuals not actively involved in a business operation who wish to support our activities.*

Friend of the Chamber ..... \$55.00

## Member Information

Type of Membership:  Business  Individual    Owner/Manager: \_\_\_\_\_

Member Directory Heading/Type of Business: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Physical Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Number of Employees: \_\_\_\_\_ Email: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Website: \_\_\_\_\_

2009 Investment: \_\_\_\_\_  Check Attached - Please Bill Me:  In Full

I'm interested in working on the \_\_\_\_\_ Committee.

*I understand that by providing my mailing address, email address, telephone and fax numbers, I have given consent to receive communications sent by or on behalf of the Cushing Chamber of Commerce.*

Signature: \_\_\_\_\_ Date: \_\_\_\_\_