



P.O. Box 735 – 1901 S. Dumas Ave.  
 Dumas, TX 79029  
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[www.dumaschamber.com](http://www.dumaschamber.com)

## Membership Application

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

Company or Individual Name: \_\_\_\_\_

Type of Business: \_\_\_\_\_

Main Representative: \_\_\_\_\_

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

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

Billing Address: \_\_\_\_\_

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

Website Address: \_\_\_\_\_ Email Address: \_\_\_\_\_

<u>Business Type</u>	<u>Membership dues Base</u>		<u>Fair Share</u>
<i>General &amp; Retail</i>	<i>\$150.00</i>	<i>Plus</i>	<i>\$5.00 per employee*</i>
<i>Manufacturing (50 or more Employees)</i>	<i>\$150.00</i>	<i>Plus</i>	<i>\$2.00 per employee*</i>
<i>Real Estate &amp; Professional Financial</i>	<i>\$150.00</i>	<i>Plus</i>	<i>\$50.00 per associate</i>
<i>Lodging</i>	<i>\$150.00</i>	<i>Plus</i>	<i>\$5.00 per room</i>
<i>Restaurants</i>	<i>\$150.00</i>	<i>Plus</i>	<i>\$0.25 per seat</i>
<i>Not for Profit Organization</i>	<i>\$150.00</i>		
<i>Individuals (non business owners)</i>	<i>\$ 50.00</i>		

Base: \$ \_\_\_\_\_ plus Fair Share \$ \_\_\_\_\_ = Membership Dues: \$ \_\_\_\_\_

How do you want to be billed?

Annually \_\_\_\_\_ Semi Annually \_\_\_\_\_ Quarterly \_\_\_\_\_ Monthly \_\_\_\_\_

*Multiple Ownership-First Business will pay base Membership Dues plus Fair Share. All other businesses under same owner will pay Fair Share only.  
 2 part-time employees equal 1 full time employee.*

*I hereby agree to invest in the future of Moore County Texas by joining the Moore County Chamber of Commerce. I hereby agree to payment of this investment within 30 days of statement and also agree that any end all benefits shall cease if we should become 90 days past due.*

**Company Rep. or Individual Signature:** \_\_\_\_\_ **Chamber Rep. Signature:** \_\_\_\_\_