



January 2007

# Lexington Chamber of Commerce Membership Application

*The undersigned hereby makes application for a voting membership in the Lexington Chamber of Commerce*

DATE \_\_\_\_\_ BUSINESS NAME \_\_\_\_\_

CONTACT NAME \_\_\_\_\_ STREET ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_ YEARS IN BUSINESS \_\_\_\_\_

TELEPHONE # \_\_\_\_\_ FAX# \_\_\_\_\_

E-MAIL ADDRESS \_\_\_\_\_ URL http://www. \_\_\_\_\_

MEMBERSHIP CATEGORY (see reverse) 1.) \_\_\_\_\_ 2.) \_\_\_\_\_ # OF EMPLOYEES \_\_\_\_\_

Please provide a brief description of your products or services for our website (30 words or less): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

ADDITIONAL MEMBERSHIP CARDS (provide names) \_\_\_\_\_

Would you like to participate in the Lexington Gift Certificate Program? (see reverse) Yes \_\_\_\_\_ No \_\_\_\_\_

Would you like to participate in the Member-to Member Discount Program? (see reverse) Yes \_\_\_\_\_ No \_\_\_\_\_, if yes, please specify discount \_\_\_\_\_

**WHO REFERRED YOU TO THE CHAMBER?** \_\_\_\_\_

Please Pay According to Category	
<b>BANKS</b> .....	\$690.00 \$ _____
<b>BUSINESS MEMBERSHIP</b>	
1-10 employees .....	\$260.00
11-25 employees ...	\$385.00
26-50 employees ...	\$530.00
over 50 .....	\$530 plus \$5 per employee over 50
(maximum \$690.00)	\$ _____
<b>CIVIC MEMBERSHIP</b> .....	\$60.00 \$ _____
Any individual holding a political office in town or state governmental affairs.	
TOTAL \$ _____	
<b>Hotels/Motels and restaurants are calculated at \$240.00 "base" plus the following:</b>	
Hotels/Motels and Bed & Breakfasts: \$4.50 per room (to \$690.00 max)	
Restaurants: .75 per chair dining room capacity, .35 per chair function room capacity (to \$690.00 max)	

Business Membership: Please calculate your dues according to the number of employees, brokers, agents, sales associates, or independent contractors in your firm. Call the Chamber Staff at (781) 862-2480 if you have any questions.

Please return this application with your check for the total amount, payable to:  
**Lexington Chamber of Commerce, C/o Treasurer, 1875 Mass Ave., Lexington, MA 02420**

Dues are deductible as a business expense, not as a charitable contribution.  
A business card may also be submitted with this application if one is available.

**Thank you for your interest in the Lexington Chamber of Commerce!**

### Chamber Membership Cards:

Each member will receive a membership card shortly after dues have been collected. Additional cards will be issued as follows: Single Business Owner (with up to 10 employees) -- each employee will receive a personalized membership card (*please provide names on the front of this invoice*). Multiple Partner or Larger-Sized Businesses (over 10 employees) -- each business will receive 10 non-personalized membership cards (business name only) to be shared among the employees. In addition, you may request up to 10 personalized membership cards (*please provide names on the front of this invoice*).

### Gift Certificate Program:

One of the many benefits of being a Chamber member is the opportunity to participate in the Gift Certificate program. Gift Certificates are sold to the general public in the Visitors Center and may be purchased in any denomination (\$10 min.). A list of participating Chamber member establishments is given out with each gift certificate. ***Please indicate whether or not you would like to participate in this program by placing an "X" in the appropriate box on the front of this invoice.*** All gift certificates are redeemable for face value by the Lexington Chamber of Commerce, within 10 business days upon receipt.

### Member-to-Member Discount Program:

The Member-to-Member Discount Program is a great way to promote business between our members by offering discounts/specials to other members. We encourage all Chamber members to take advantage of this program by bringing your membership cards to the participating establishments and requesting the Member-to-Member discount being offered.

### Membership Category Listing Options: (to identify your business on our Website)

*Please determine your business category and note the corresponding 4-letter code in the space provided on the front of this invoice. If two categories describe your type of business please list both.*

<u>Accountant</u> - ACCO	<u>Food, Retail and Wholesale</u> - FOOD	<u>Newspaper &amp; Publication</u> - NEWS
<u>Advertising/Marketing</u> - ADVE	<u>Funeral Home</u> - FUNE	<u>Personal Wellness &amp; Beauty</u> - PERS
<u>Alterations/Tailoring</u> - ALTE	<u>Genealogy</u> - GENE	<u>Pharmacy</u> - PHAR
<u>Art Galleries/Antiques</u> - ARTG	<u>Graphic Arts-Printing, Services, Supplies, Maps</u> - GRAP	<u>Photography/Photo Supplies &amp; Framing</u> - PHOT
<u>Attorney</u> - ATTO	<u>Historical Point of Interest</u> - HIST	<u>Private Equity/Venture Capital</u> - PRIV
<u>Auto</u> - AUTO	<u>Household Services</u> - HOUS	<u>Promotional Products &amp; Corporate Gifts</u> - PROM
<u>Bank</u> - BANK	<u>Insurance</u> - INSU	<u>Real Estate</u> - REAL
<u>Bio Technology</u> - BIOT	<u>Learning, Academic &amp; Arts</u> - LEAR	<u>Recreation &amp; Fitness</u> - RECR
<u>Business Services</u> - BUSI	<u>Local Government &amp; Civic Official</u> - LOCA	<u>Restaurant, Bakery, Cafe &amp; Catering</u> - REST
<u>Career Services and Staffing</u> - CARE	<u>Lodging</u> - LODG	<u>Retail Shopping</u> - RETA
<u>Community Organization</u> - CIVI	<u>Manufacturers/Distributors</u> - MANU	<u>Retirement Community/Assisted Living</u> - RETI
<u>Computer &amp; Web Design</u> - COMP	<u>Medical Care Services</u> - MEDI	<u>Staffing &amp; Personnel</u> - STAFF
<u>Construction &amp; Architects</u> - CONS	<u>Medical Equipment</u> - MEDE	<u>Telecommunications &amp; Utilities</u> - UTIL
<u>Dry Cleaners</u> - DRYC	<u>Moving, Relocation &amp; Storage</u> - MOVI	<u>Travel &amp; Tourism</u> - TRAV
<u>Environmental</u> - ENVI	<u>Music</u> - MUSI	<u>Transportation</u> - TRAN
<u>Financial Services</u> - FINA	<u>Multimedia</u> - MULT	<u>Veterinarians</u> - VETE
<u>Florist, Garden &amp; Landscape</u> - FLORI		