



Columbus Area Chamber of Commerce

# You Are Worth It!

753 33rd Ave. Columbus, NE 68601  
Ph: 402-564-2769 Fax: 402-564-2026  
www.thecolumbuspage.com  
info@columbuschamber.org



## Business Information

Business or Organization Name: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Mailing Address  Same as physical

Street/PO Box: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

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

Number of Full-Time and Part-Time Employees: #FTE \_\_\_\_\_ #PTE \_\_\_\_\_

## Main Contact Information

Name: \_\_\_\_\_

Title/Role: \_\_\_\_\_

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

Email: \_\_\_\_\_

## Social Media

LinkedIn: \_\_\_\_\_

Facebook: \_\_\_\_\_

Twitter: \_\_\_\_\_

Instagram: \_\_\_\_\_

YouTube: \_\_\_\_\_

Google My Business: \_\_\_\_\_

Better Business Bureau: \_\_\_\_\_

## Why did you join the Columbus Chamber?

- |   |   |
|---|---|
| <input type="checkbox"/> Advocacy/Public Policy | <input type="checkbox"/> Workforce Development    |
| <input type="checkbox"/> Business Assistance    | <input type="checkbox"/> Economic Development     |
| <input type="checkbox"/> Business Connections   | <input type="checkbox"/> Professional Development |
| <input type="checkbox"/> Community Involvement  | <input type="checkbox"/> All                      |
| <input type="checkbox"/> Marketing/Visibility   | <input type="checkbox"/> Other                    |

## Describe Your Business

Categories (see directory): \_\_\_\_\_

# Membership Dues

|   |              |                        |
|---|--------------|------------------------|
| <b>Base Membership</b>                            | <b>\$285</b> | \$ <u>  285  </u>      |
| <small>(Includes owner/manager)</small>           |              |                        |
| - \$80 per business partner/professional (if any) |              | + \$ <u>          </u> |
| - 2-25 employees @ \$13.50 each                   |              | + \$ <u>          </u> |
| - 26-75 employees @ \$7.50 each                   |              | + \$ <u>          </u> |
| - 76 or more employees @ \$5.50 each              |              | + \$ <u>          </u> |
| Subtotal  |              | \$ <u>          </u>   |

|                               |                                  |                               |
|-------------------------------|----------------------------------|-------------------------------|
| <b>Financial Institutions</b> | <b>\$285 + Based on deposits</b> | \$ <u>  285  </u>             |
| or                            |                                  | + \$ <u>          </u>        |
| <b>Utilities</b>              | <b>\$285 + Negotiated</b>        | Subtotal \$ <u>          </u> |

|                     |                                    |                        |
|---------------------|------------------------------------|------------------------|
| <b>Professional</b> | <b>\$285 + \$80 p/professional</b> | \$ <u>  285  </u>      |
|                     |                                    | + \$ <u>          </u> |
| Subtotal            |                                    | \$ <u>          </u>   |

|   |       |                   |
|---|-------|-------------------|
| <b>Friend of Columbus</b> (Not categorized)               | \$285 | <u>          </u> |
| <b>Individual</b>   | \$160 | <u>          </u> |
| <b>Non-Profit</b> (Organizations, Associations, Churches) | \$180 | <u>          </u> |

| Billing Information                 |  |
|-------------------------------------|--|
| Billing Contact                     | <input type="checkbox"/> Bill to Main Contact    |
| Name: _____                         | Title/Role: _____                                |
| Phone: _____                        | Email: _____                                     |
| Billing Address                     | <input type="checkbox"/> Same as Mailing Address |
| Street/PO Box: _____                |  |
| City: _____ State: _____ Zip: _____ |  |

|                                    |                                      |                                |
|------------------------------------|--------------------------------------|--------------------------------|
| <b>Catalyst Monthly Newsletter</b> | <input type="checkbox"/> Mailed Copy | <input type="checkbox"/> Email |
|------------------------------------|--------------------------------------|--------------------------------|

| Payment Details  |  |                                      |
|--|--|--------------------------------------|
| <input type="checkbox"/> Annual Payment                          | <input type="checkbox"/> Semi-Annual Payment | <input type="checkbox"/> Monthly ACH |
| Card # _____ Exp. _____ CVV: _____ Zip Code: _____               |  |                                      |
| (For compliance purposes, credit card information is not stored) |  |                                      |

Authorized By: \_\_\_\_\_ Membership Total: \$ \_\_\_\_\_

Chamber Rep: \_\_\_\_\_