



Chamber of Commerce

## Membership Application

Date of application \_\_\_\_\_

Yes, I would like to invest in my business and community by joining the North of the River Chamber of Commerce.

Firm or Individual Name: \_\_\_\_\_

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

Address: \_\_\_\_\_ Zip: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Phone: \_\_\_\_\_

Fax: \_\_\_\_\_ E-mail: \_\_\_\_\_ Web Site: \_\_\_\_\_

Referred by: \_\_\_\_\_

### I am interested in participation in the following committees:

\_\_\_\_ Business Expo    \_\_\_\_ Economic Conference    \_\_\_\_ Fall Community Event  
\_\_\_\_ Football Booklet    \_\_\_\_ Golf Tournament    \_\_\_\_ Legislative    \_\_\_\_ Memberships/Mixers    \_\_\_\_ Scholarships

### Membership Rates Schedule\*

**\*Due to COVID-19 all 2021 Membership rates are discounted 50%**

\_\_\_\_ ~~\$30.00~~/**\$15** Individual Membership                      \_\_\_\_ ~~\$75~~/**\$37.50** Charitable Nonprofit  
\_\_\_\_\_  
(Please include Tax ID#)

\_\_\_\_ ~~\$100.00~~/**\$50** Business (1-5 employees)                      \_\_\_\_ ~~\$150.00~~/**\$75** Business (6-25 employees)

\_\_\_\_ ~~\$200.00~~/**\$100** Business (26-50 employees)                      ~~\$250.00~~/**\$150** Business ( 51+ employees)

\_\_\_\_ **\$25.00** Please add administration fee for new members (*one time charge*)

I am enclosing: \$ \_\_\_\_\_ (*includes \$25.00 Administration fee*)

Make check payable to: **North of the River Chamber of Commerce**, P.O. Box 5551, Bakersfield, CA. 93388

**Please provide a brief description of your business:**

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P.O. BOX 5551, BAKERSFIELD, CA. 93388  
(661) 873-4709  
E-mail: [info@norchamber.org](mailto:info@norchamber.org)

