



## 2020-2021 BUSINESS MEMBERSHIP APPLICATION

This application, for your organization's membership in the Fairfield Chamber of Commerce, is subject to approval by the Board of Directors.

### BUSINESS INFORMATION

List information as you would like it to appear in the Chamber Directory

Company Name: \_\_\_\_\_  
Physical Address: Street: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_  
Mailing Address (if different): Street: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_  
General Phone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_  
Website: \_\_\_\_\_  
General E-Mail for Directory: \_\_\_\_\_  
Number of employees at this location: Full time: \_\_\_\_\_ Part time: \_\_\_\_\_  
Type of Business (Please describe): \_\_\_\_\_  
Non-Profit Tax Status: Is business a 501(c)(3)? \_\_\_\_\_  
Is your business Family-Owned?: \_\_\_\_\_ What year was business established?: \_\_\_\_\_

### CONTACT INFORMATION

Primary Contact Name: \_\_\_\_\_  
Email Address: \_\_\_\_\_  
Title: \_\_\_\_\_  
Work Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_  
Billing Contact Name: \_\_\_\_\_  
Billing Address if different than above: \_\_\_\_\_  
Billing Email Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Additional Contacts: (Include name and email)

\_\_\_\_\_  
\_\_\_\_\_

Signature of person completing this form: \_\_\_\_\_ Date: \_\_\_\_\_

### MEMBERSHIP DUES INFORMATION

Membership Dues (see side 2) \$ \_\_\_\_\_  
One-time Processing Fee for New Members \$ \_\_\_\_\_ 35.00  
Total Due Upon Signing \$ \_\_\_\_\_

Date received at  
Chamber office:

\_\_\_\_\_

*Payment must accompany completed application. Return to:*  
**Fairfield Chamber of Commerce**  
**1597 Post Road, Fairfield, CT 06824**  
**Phone: 203.255.1011 Fax: 203.256.9990**  
**Email: Krista@FairfieldCTChamber.com**  
**www.FairfieldCTChamber.com**

#### Payment by Credit Card:

Visa  Master Card  AMEX

Card # \_\_\_\_\_

Name on Card: \_\_\_\_\_

Expiration Date: \_\_\_\_\_ CSC Code: \_\_\_\_\_



## Fairfield Chamber of Commerce 2020-2021 Member Fee Schedule

July 1, 2020—June 30, 2021

### 2020-2021 Member Investment Schedule

1-2	Owner + Employees	\$285
3-7	Owner + Employees	\$357
8-13	Owner + Employees	\$477
14-19	Owner + Employees	\$595
20-29	Owner + Employees	\$714
30-39	Owner + Employees	\$942
40-49	Owner + Employees	\$1,106
50-99	Owner + Employees	\$1,358
100+	Owner + Employees	\$2,143

#### Membership Investment Calculation:

**Basic:** Your membership fee is based on the number of full-time employees, or part-time equivalents, on your company's payroll as of 7/1/2019... or when approved for membership, whichever is later.

**Real Estate Agent:** Any Real Estate agent acting as an independent contractor can join for the Associate rate of \$160. This is considered an "Associate" membership.

**Banks:** A bank's membership fee is calculated on the total number of branches within the town of Fairfield. The per branch fee is \$675.

#### Notes:

- New members pay the full amount to cover their first 12 months, and will be invoiced annually, on the joined Anniversary date.
- "Employee" is anyone who works for the business. Equivalent fulltime employees at 40 hours (e.g., two part-time employees working 20 hours each equals one full-time employee).
- The "voluntary" Technology Contribution is critical to keep the chamber running smoothly. It helps with expenses for computers, phone equipment, and will cover repairs when needed.
- The FELO and Leads Group Programs have an additional fee to participate.