MEMBERSHIP APPLICATION



COMPANY INFORMATION	N						
Company Name:		Join Date:					
Address:							
City/State/Zip:							
Is this a home-based add	ress? ☐ Yes ☐ No (If ye	es, address will no	ot be publis	hed in member directory)			
Company Phone:							
Company Website:							
Primary Business Categor	·y:						
Total # of Employees (in B	Benton & Franklin Counti	es):					
Business Ownership (chec	☐ Minority-Owned		☐ Veteran-Owned	☐ Woman-Owned			
CONTACT INFORMATION							
Primary Contact:							
Contact Title:							
Contact Phone:	Contact Ema	Contact Email:					
*Note: This contact information	will be listed in member direc	tory					
ADDITIONAL COMPANY	CONTACTS						
Additional Contact:		Additional Contact:					
Contact Phone:		Contact Phone:					
Contact Email:		Contact	Contact Email:				
MEMBERSHIP LEVEL (sele	ect one)						
☐ Stakeholder (\$12,000)	☐ Leader (\$6,000)	☐ Growth (\$	3,000)	☐ Connect (\$1,000)	☐ Classic (\$400)		
(5+ locations, 7+ categories)	(5 locations, 7 categories)	(3 locations, 5 ca	ategories)	(2 locations, 3 categories)	(1 location, 1 category)		
*Note: Membership is automati	cally renewed anually						
PAYMENT METHOD							
☐ Check Enclosed	☐ Send Invoice	☐ Credit Card (American Express, Discover, Mastercard, Visa)					
Card #:							
Expiration Date:				CVV:			
Name on Card:				Signature:			



MEMBERSHIP APPLICATION



ENAME COMMUNICATION DREFERENCES								
EMAIL COMMUNICATION PREFERENCES								
All contacts receive the weekly eNewsletter and eBlast		ial topics you wish to rec	eive					
□ All □ All Events □ All Program		☐ Advocacy	☐ myTRI 2030	□ PTAC				
Specific Chamber Events, Programs and So	ervices (Please specify if "a	all" isn't selected)						
□ Annual Meeting & Awards Luncheon □ Ask the Experts □ Bridging Partnerships Small Business Symposium								
☐ Business After Hours ☐ Economic G	ardening	ted Leaders Recepti	on 🔲 Good Hea	alth is Good Business				
☐ LEARN Groups ☐ Meet the Buyer	☐ Meet the Chamb	oer	Membership Lunch	eons				
□ Office Depot Savings Program □ Procurement Power Hour □ Small Business Incentive Program								
☐ State of the Cities Luncheon ☐ Tri-Cities Day at the Capitol ☐ Tri-Cities Day with the Seattle Seahawks								
☐ Tri-Cities Diversity Summit ☐ Tri-Cities Women in Business Conference ☐ Washington Workforce Portal								
ADDITIONAL BUSINESS LOCATIONS								
Refer to reverse side for number of locations per mem	bership level	_						
2. Address:	3. Address:							
City/State/Zip:	City/State/Zip:							
Company Phone:	Company Phone:							
Primary Contact:	Primary Contact:							
4. Address:	5. Address:							
City/State/Zip:	City/State/Zip:							
Company Phone:	Company Phone:							
Primary Contact:	Primary Contact:							
ADDITIONAL BUSINESS CATEGORIES								
Refer to reverse side for number of categories per mer	nbership level							
2.	3.		4.					
5.	6.		7.					
COMPANY SOCIAL MEDIA PROFILES								
Your company's social media profiles will be linked in t	he membership directory							
Facebook:	LinkedIn:							
Twitter:	Instagram:							
YouTube:	Yelp:							
Pinterest·	TrinAdvisor:							

