



Zimmerman Chamber of Commerce 2019 Membership Form

12980 Fremont Avenue, Suite C
 Zimmerman, MN 55398
 763-856-4404
 zimmermanchamberofcommerce@gmail.com

New Member Referred by _____ Phone: _____

Business Name: _____

Contact Name: _____

MAILING Address: _____

STREET/Physical Address: _____

City: _____ State: _____ Zip: _____

Which address would you like listed in Community Guide? MAILING ADDRESS or STREET ADDRESS (circle one)

Phone: _____ Fax: _____

Cell: _____ Email: _____

Website: _____ Business Hours: _____

Business Category: (Service or retail): _____

Brief Description of Business: _____

Best way to communicate email or phone (circle one)

Number of Employees:

STEP 1: # of Part Time Employees (under 20 hrs/wk): _____ → Convert to Full Time Equivalent (2 PT = 1 FT employee): _____

STEP 2: # of Full Time Employees: + _____

STEP 3: Total Employees: = _____

Membership Investment : Choose One

Standard Rates

<input type="checkbox"/>	Business Owner, no employees	\$130.00
<input type="checkbox"/>	Business Owner, plus 1-2	\$155.00
<input type="checkbox"/>	Business Owner, plus 3-5	\$180.00
<input type="checkbox"/>	Business Owner, plus 6-10	\$220.00
<input type="checkbox"/>	Business Owner, plus 11-20	\$290.00
<input type="checkbox"/>	Business Owner, plus 21-70	\$410.00
<input type="checkbox"/>	Business Owner, plus 70+	\$575.00

Government* & Non-Profit Rates**

<input type="checkbox"/>	0-3 paid staff	\$115.00	*Government rate extends to government offices and schools not exempt from membership
<input type="checkbox"/>	4-7	\$135.00	
<input type="checkbox"/>	8-15	\$165.00	
<input type="checkbox"/>	16-25	\$205.00	
<input type="checkbox"/>	26+	\$245.00	
			** to qualify for our non-profit rates, a copy of 501c3 Certificate must accompany

Office use only

Date Received _____

Check # _____

Amount# _____

Membership Investment Dues	
Voluntary Donation to Chamber	
Total Due	