



300 Civic Center Plaza
Glendale Heights, IL 60139
Phone: 630-909-5361
www.glendaleheightschamber.com

Thank you for your interest in the Glendale Heights Chamber of Commerce! Please complete this application and return to the chamber with your membership dues.

Representative's Name: _____ Title: _____

Additional Representative: _____ Title: _____

Business Name: _____

Business Address: _____ Unit / Suite: _____

City: _____ State: _____ Zip Code: _____

Telephone (_____) _____ Fax (_____) _____

E-Mail Address: _____

Company Website: _____

Type of Business: _____

Years in Business _____ Number of Employees _____

*Brief description of your business in 25 words or less: _____

Membership Level:

- Basic Membership \$250.00
- Basic Plus Membership \$625.00
- Bronze Membership \$1250.00
- Silver Membership (limit 8) \$2500
- Platinum Membership (limit 2) \$6000

Payment Options: (Please Check) cash _____ check # _____ credit card _____		
Credit card: (Please Circle) Visa or MasterCard		
Card Number: _____		
Card Holder's Name: _____		
Billing Zip Code: _____	V-code: _____	Expiration Date: _____
		(Last 3 digits on back of card)
Member's Signature _____		Date _____