Hispanic Chamber of Commerce of Montgomery County
150 Maryland Avenue, Rockville, MD 20850
Telephone: 240-453-0606 – Fax: 240-453-0066
info@hccmc.org

Membership Update Form

Membership Information: Print clearly or type the information below

Company: _____ **Years in Business** _____
Address: _____ **Suite #:** _____
City: _____ **State:** _____ **Zip:** _____
Telephone (Main): _____ **Ext.:** _____ **Fax:** _____
Website: _____ **Type of Business:** _____
NAICS #:_____ **Company Description of Products or Services:**
_____
_____
_____
_____

Representative (s) (Please submit a separate sheet of paper listing other employees names and contact information to be included in our newsletter and events dissemination lists).

Main Contact Name: _____ Title: _____

Telephone: _____ Exit. _____ E-mail: _____

Secondary Contact Name: _____ Title: _____

Telephone: _____ Ext. _____ E-mail: _____
Sponsor by _____

Reason for Joining **___ Networking** **___ Community Support** **___ Professional Development** **___ Advocacy**

Annual Membership Dues Schedule as a July 2007 - *Note:* You can deduct up to 100% of your membership dues investments as a business expenses. As a 501 (c) 6 organization, payment to HCCMC is not tax deductible as a charitable contribution.

Business with:

Under 25	Employees	$300.00
26 – 55	Employees	$500.00
55 - 100	Employees	$750.00
101- 500	Employees	$1,000.00
501 – 1000	Employees	1,500.00
Over 1001	Employees	$2,000.00

Non-Profits:

Under 10	Employees	$300.00
11 – 50	Employees	$500.00
51 and over	Employees	$750.00

Method of Payments:

Annual Dues: $_____ Check #: _____
(Refer to the above amount)

Make check payable to HCCMC
Mail to: HCCMC - 150 Maryland Ave., Rockville, MD 20850.

By Credit Card:

_____ VISA _____ MC _____Am EX

Card #: _____ Expiration Date: _____

Card Holder Name: _____
Address (if different from above): _____

_____
Signature