



PO Box 237  
 Paulding, Ohio  
 45879  
 419-399-5215

For Chamber Use:	
Date Rec'd	_____
Check #	_____
Amount	_____

To:

*Please mail checks to Paulding Chamber of Commerce, PO Box 237, Paulding, Ohio 45879  
 OR pay online with a credit card at [www.pauldingchamber.com](http://www.pauldingchamber.com).*

# 2021 Membership Invoice

*Please indicate any changes or corrections to your current information below and return this form with your payment.*

Email	_____
Phone	_____
Cell Phone	_____
Website	_____

**Membership Dues (please check one):**

- |  |          |
|--|----------|
| <input type="checkbox"/> Financial Institution                         | \$600.00 |
| <input type="checkbox"/> Utility                                       | \$750.00 |
| <input type="checkbox"/> 501.C.3, Not for Profit, or Service Club      | \$150.00 |
| <input type="checkbox"/> Government Office                             | \$150.00 |
| <input type="checkbox"/> Individual Membership (not owning a business) | \$75.00  |
| <input type="checkbox"/> Self-employed Business (with no employees)    | \$125.00 |
| <input type="checkbox"/> Business with 1-10 employees                  | \$200.00 |
| <input type="checkbox"/> Business with 11-15 employees                 | \$300.00 |
| <input type="checkbox"/> Business with 16-20 employees                 | \$400.00 |
| <input type="checkbox"/> Business with 21-30 employees                 | \$450.00 |
| <input type="checkbox"/> Business with 31-50 employees                 | \$500.00 |
| <input type="checkbox"/> Business with 51-100 employees                | \$650.00 |
| <input type="checkbox"/> Business with 101-200 employees               | \$750.00 |
| <input type="checkbox"/> Business with over 200 employees              | \$850.00 |

**Membership Dues:** \_\_\_\_\_

**Sponsorship Totals (second page):** \_\_\_\_\_

10% discount on AL A CARTE sponsorships if paid before January 31, 2021.

**Total Due:** \_\_\_\_\_

**Membership Survey**

**Please complete this survey to help us, help you as best as possible.**

Indicate the top reason(s) why you are joining the Chamber.

<input type="checkbox"/>	Increase Revenue
<input type="checkbox"/>	Expand networking & leadership dev. opportunities
<input type="checkbox"/>	Raise your visibility
<input type="checkbox"/>	Insurance discount benefits
<input type="checkbox"/>	Enhance credibility
<input type="checkbox"/>	Connect with business leaders in the community
<input type="checkbox"/>	Give back to the community

**What year was your business established?** \_\_\_\_\_

Where do you get your information on Chamber events?

<input type="checkbox"/>	Newspaper
<input type="checkbox"/>	Website
<input type="checkbox"/>	Social Media
<input type="checkbox"/>	Chamber Newsletter

**Anything else you'd like us to know?**  
 \_\_\_\_\_  
 \_\_\_\_\_