



2008 - 2009 Investment Schedule

Rates effective through 8/1/2009

If you join September through May, your initial investment will be prorated. If you are joining in June or July, please pay full annual amount.

Businesses Based upon total number of people employed by your business, including the owner/operator.

1-5 employees	\$199
6-10 employees	\$249
11-20 employees	\$335
21-50 employees	\$415
51-100 employees	\$500
101+ employees	\$625

Associate \$100

Individual with no business affiliation - not available to businesses.
Ideal for retirees or community minded citizens not currently employed

Non-Profit

For churches, non profit civic clubs or organizations **\$150**

Educational Facility / Government Agency / Apt \$650

Public Utility \$1100

Financial Institution/Bank/Credit Union Base Rate \$700

Add \$25 for each \$1M over \$5M

Please indicate \$ amount of deposits in local branch _____

Hotels \$500

Payment Options

____ Check payable to Bixby Chamber of Commerce for \$_____ enclosed

____ Charge my MC/VISA/AMEX/DISC Monthly Bank Draft is available upon request

Acct # _____

Expires MM/YY _____

3 digit security code _____

MC/Visa Billing Address _____

Signature _____

Monthly Bank Draft ACH Fee \$ 25.00 Annual Fee

Annual Membership Investment \$ _____

Your annual membership investment is deductible as an ordinary and necessary marketing or advertising business expense.

Complete this form and return it, with payment to:

Bixby Chamber of Commerce

4 East Dawes Bixby, OK 74008
918.366.9445 phone 918.366.9443 fax
www.bixbychamber.com

Contact Information

Date _____

Business/Member Name/Organization _____

Mailing Address _____

City _____ State _____ Zip _____

Physical location (if different from mailing) Address _____

City _____ State _____ Zip _____

Phone _____ Fax _____

Business Website _____

Business Category (for business directory listings) _____

Number of employees at your business/branch/location _____

Full Time _____ Part Time _____

PRIMARY REPRESENTATIVE

Listed as main contact in online and print directory listings and will receive all Chamber communications.

Name/Title _____

Email address _____

SECOND REPRESENTATIVE

Will receive Chamber communications.

Name/Title _____

Email address _____

DESCRIPTION OF YOUR BUSINESS Please tell us a bit about your business; we will use this information to introduce you to other members in an upcoming newsletter and/ or email. You may attach a brochure or other form if necessary.

WELCOME!!!!

You will receive a letter in the mail soon confirming your membership, with information on scheduling a ribbon cutting along with your membership decal. Members receive weekly "What's Up in Bixby" emails keeping them apprised of weekly community and chamber events, including monthly member luncheons and networking events.